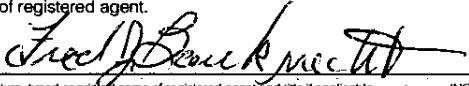


2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 01, 2004 8:00 am
Secretary of State

03-01-2004 90039 019 ****61.25

DOCUMENT # N07395 1. Entity Name TRINITY EVANGELICAL LUTHERAN CHURCH OF NEW SMYRNA BEACH, INC.																																																																																																																																																					
Principal Place of Business 485 TURNBULL BAY ROAD NEW SMYRNA BEACH, FL 32168-3234			Mailing Address 485 TURNBULL BAY ROAD NEW SMYRNA BEACH, FL 32168-3234																																																																																																																																																		
2. Principal Place of Business Suite, Apt. #, etc. City & State Zip Country		3. Mailing Address Suite, Apt. #, etc. City & State Zip Country																																																																																																																																																			
4. FEI Number 59-2332805				Applied For ☐ Not Applicable																																																																																																																																																	
5. Certificate of Status Desired ☐				\$8.75 Additional Fee Required																																																																																																																																																	
6. Name and Address of Current Registered Agent DOYLE, JOAN 485 TURNBULL BAY RD NEW SMYRNA BEACH, FL 32168			7. Name and Address of New Registered Agent Name Fred Bauknecht Street Address (P.O. Box Number is Not Acceptable) 485 Turnbull Bay Road City New Smyrna Beach FL Zip Code 32168																																																																																																																																																		
8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. SIGNATURE  DATE 2.27.04 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)																																																																																																																																																					
Filing Fee is \$61.25 Due by May 1, 2004		9. Election Campaign Financing Trust Fund Contribution. ☐		\$5.00 May Be Added to Fees																																																																																																																																																	
Make check payable to Florida Department of State																																																																																																																																																					
<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <th colspan="3" style="text-align: left;">10. OFFICERS AND DIRECTORS</th> <th colspan="3" style="text-align: left;">11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10</th> </tr> <tr> <td style="width: 15%;">TITLE</td> <td style="width: 65%;">NAME</td> <td style="width: 20%; text-align: right;">☐ Delete</td> <td style="width: 15%;">TITLE</td> <td style="width: 65%;">NAME</td> <td style="width: 20%; text-align: right;">☐ Change ☐ Addition</td> </tr> <tr> <td>STREET ADDRESS</td> <td>DOYLE, JOAN</td> <td></td> <td>STREET ADDRESS</td> <td>Secretary Joan Doyle</td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td>696 MIDDLEBURY LOOP NEW SMYRNA BEACH, FL 32168</td> <td></td> <td>CITY-ST-ZIP</td> <td>696 Middlebury Loop New Smyrna Beach, FL 32168</td> <td></td> </tr> <tr> <td>TITLE</td> <td>PD</td> <td style="text-align: right;">☒ Delete</td> <td>TITLE</td> <td>President</td> <td style="text-align: right;">☐ Change ☒ Addition</td> </tr> <tr> <td>NAME</td> <td>GROSS, ROBERT</td> <td></td> <td>NAME</td> <td>NORM MARQUIS</td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td>2809 SILVER PALM DRIVE</td> <td></td> <td>STREET ADDRESS</td> <td>2701 Turnbull Estates Drive</td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td>EDGEWATER, FL 32141</td> <td></td> <td>CITY-ST-ZIP</td> <td>New Smyrna Beach, FL 32168</td> <td></td> </tr> <tr> <td>TITLE</td> <td>VD</td> <td style="text-align: right;">☐ Delete</td> <td>TITLE</td> <td>Treasurer</td> <td style="text-align: right;">☐ Change ☒ Addition</td> </tr> <tr> <td>NAME</td> <td>DEYBER, DICK</td> <td></td> <td>NAME</td> <td>Fred Bauknecht</td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td>6408 LONGLAKE DRIVE</td> <td></td> <td>STREET ADDRESS</td> <td>39 Lake Fairgreen Circle</td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td>PORT ORANGE, FL 32128</td> <td></td> <td>CITY-ST-ZIP</td> <td>New Smyrna Beach, FL 32168</td> <td></td> </tr> <tr> <td>TITLE</td> <td>S</td> <td style="text-align: right;">☒ Delete</td> <td>TITLE</td> <td></td> <td style="text-align: right;">☐ Change ☐ Addition</td> </tr> <tr> <td>NAME</td> <td>WEBER, LORENE</td> <td></td> <td>NAME</td> <td></td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td>49 BOGEY CIRCLE</td> <td></td> <td>STREET ADDRESS</td> <td></td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td>NEW SMYRNA BEACH, FL 32168</td> <td></td> <td>CITY-ST-ZIP</td> <td></td> <td></td> </tr> <tr> <td>TITLE</td> <td></td> <td style="text-align: right;">☐ Delete</td> <td>TITLE</td> <td></td> <td style="text-align: right;">☐ Change ☐ Addition</td> </tr> <tr> <td>NAME</td> <td></td> <td></td> <td>NAME</td> <td></td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td></td> <td></td> <td>STREET ADDRESS</td> <td></td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td></td> <td></td> <td>CITY-ST-ZIP</td> <td></td> <td></td> </tr> <tr> <td>TITLE</td> <td></td> <td style="text-align: right;">☐ Delete</td> <td>TITLE</td> <td></td> <td style="text-align: right;">☐ Change ☐ Addition</td> </tr> <tr> <td>NAME</td> <td></td> <td></td> <td>NAME</td> <td></td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td></td> <td></td> <td>STREET ADDRESS</td> <td></td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td></td> <td></td> <td>CITY-ST-ZIP</td> <td></td> <td></td> </tr> </table>						10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10			TITLE	NAME	☐ Delete	TITLE	NAME	☐ Change ☐ Addition	STREET ADDRESS	DOYLE, JOAN		STREET ADDRESS	Secretary Joan Doyle		CITY-ST-ZIP	696 MIDDLEBURY LOOP NEW SMYRNA BEACH, FL 32168		CITY-ST-ZIP	696 Middlebury Loop New Smyrna Beach, FL 32168		TITLE	PD	☒ Delete	TITLE	President	☐ Change ☒ Addition	NAME	GROSS, ROBERT		NAME	NORM MARQUIS		STREET ADDRESS	2809 SILVER PALM DRIVE		STREET ADDRESS	2701 Turnbull Estates Drive		CITY-ST-ZIP	EDGEWATER, FL 32141		CITY-ST-ZIP	New Smyrna Beach, FL 32168		TITLE	VD	☐ Delete	TITLE	Treasurer	☐ Change ☒ Addition	NAME	DEYBER, DICK		NAME	Fred Bauknecht		STREET ADDRESS	6408 LONGLAKE DRIVE		STREET ADDRESS	39 Lake Fairgreen Circle		CITY-ST-ZIP	PORT ORANGE, FL 32128		CITY-ST-ZIP	New Smyrna Beach, FL 32168		TITLE	S	☒ Delete	TITLE		☐ Change ☐ Addition	NAME	WEBER, LORENE		NAME			STREET ADDRESS	49 BOGEY CIRCLE		STREET ADDRESS			CITY-ST-ZIP	NEW SMYRNA BEACH, FL 32168		CITY-ST-ZIP			TITLE		☐ Delete	TITLE		☐ Change ☐ Addition	NAME			NAME			STREET ADDRESS			STREET ADDRESS			CITY-ST-ZIP			CITY-ST-ZIP			TITLE		☐ Delete	TITLE		☐ Change ☐ Addition	NAME			NAME			STREET ADDRESS			STREET ADDRESS			CITY-ST-ZIP			CITY-ST-ZIP		
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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes; I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.																																																																																																																																																					
SIGNATURE: 				Date 2.27.04 Daytime Phone # 386 428-4307																																																																																																																																																	
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