

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 27, 2006 8:00 am
Secretary of State

03-27-2006 90239 010 ****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		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country	4. FEI Number 59-2332805	
5. Certificate of Status Desired ☐				Applied For ☐ Not Applicable	
6. Name and Address of Current Registered Agent TEEHAN, KAREN 485 TURNBULL BAY RD NEW SMYRNA BEACH, FL 32168				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
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 _____ Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE					
Filing Fee is \$61.25 Due by May 1, 2006		9. Election Campaign Financing Trust Fund Contribution. ☐		\$5.00 May Be Added to Fees	
Make check payable to Florida Department of State					
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T DOYLE, JOAN 200 S. RIVERSIDE DR #201 NEW SMYRNA BEACH, FL 32168 ☒ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	P Lew Zimmerman 48 LAKE FAIRGREEN Circle New Smyrna Beach, FL 32168 ☐ Change ☒ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD MARQUIS, NORM 2701 TURNBULL ESTATES DRIVE NEW SMYRNA BEACH, FL 32168 ☒ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	V Robert Wolff 1812 CoCo Palm Edgewater FL 32132 ☐ Change ☒ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD DEYBER, DICK 6408 LONGLAKE DRIVE PORT ORANGE, FL 32128 ☒ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	S Paula Bernbaum 485 Turnbull Bay Rd. New Smyrna Beach, FL 32168 ☐ Change ☒ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S FALLER, DAVE 2752 TURNBALL ESTATES DRIVE NEW SMYRNA BEACH, FL 32168 ☒ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	T Karen Teehan 200 S. Riverside Dr. #201 New Smyrna Beach, FL 32168 ☐ Change ☒ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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: <u>Karen Teehan</u> <u>KAREN TEEHAN</u> <u>3/23/06</u> <u>(386) 428-4307</u> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #					