

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N12659

FILED
Apr 19, 2010
Secretary of State

Entity Name: ALL SAINTS LUTHERAN CHURCH OF TAMPA, INC.

Current Principal Place of Business:

5315 VAN DYKE RD
C/O REV. M. RICHARD MALIVUK
LUTZ, FL 33558

New Principal Place of Business:

Current Mailing Address:

5315 VAN DYKE RD
C/O REV. M. RICHARD MALIVUK
LUTZ, FL 33558

New Mailing Address:

FEI Number: 59-2606498 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

MALIVUK, M. RICHARD (REV.)
4321 HAWKS NEST DR.
LUTZ, FL 33558 US

Name and Address of New Registered Agent:

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.

SIGNATURE: _____

Electronic Signature of Registered Agent

_____ Date

OFFICERS AND DIRECTORS:

Title: DP
Name: NELSON, JAMES
Address: 4204 HOLLOW TRAIL DR.
City-St-Zip: TAMPA, FL 33624

Title: DS
Name: GREENSFELDER, MARCIA
Address: 14817 WINDING CREEK CT.
City-St-Zip: TAMPA, FL 333613

Title: DT
Name: BREEDE, TINA
Address: 19711 SPRING WILLOW CT.
City-St-Zip: ODESSA, FL 33556

Title: D
Name: SCHMIDT, ED
Address: 7339 CHAIRMAN CT.
City-St-Zip: PORT RICHEY, FL 34668

Title: D
Name: WILLIAMS, LINDSAY
Address: 14106 MARLBERRY WAY
City-St-Zip: ODESSA, FL 33556

Title: D
Name: MAGYAR, BOB
Address: 13513 LUNKER CT.
City-St-Zip: ODESSA, FL 33556

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

SIGNATURE: M. RICHARD MALIVUK

REV

04/19/2010

Electronic Signature of Signing Officer or Director

Date