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1995 MAY -1 PM 5:36

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**CORPORATION
ANNUAL REPORT
1995**



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # -13538 *N/13538*
1. Corporation Name **EELC-ST. PAUL'S CONGREGATION IN SOUTH FLORIDA**
C/O ERNA LUNING
372 PAULUS COURT
BOCA RATON, FLORIDA 33486-3122

Principal Place of Business
3900 STATE DR # 7
FT. LAUDERDALE
FLORIDA 33319

Mailing Address
372 PAULUS COURT
BOCA RATON
FLORIDA 33486-3122

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 02/21/1986	3a. Date of Last Report 1994
4. FEI Number 59-2696146	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status <input type="checkbox"/>	\$68.75 Supplemental Fee Not Required
8. This corporation has liability for intangible tax under S. 189.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No	

2. Principal Place of Business 21	2a. Mailing Address 26
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23	City & State 28
Zip 24	Country 25
Zip 29	Country 30

9. Name and Address of Current Registered Agent
LUNING, ERNA
372 PAULUS COURT
BOCA RATON, FL. 33486-3122

10. Name and Address of New Registered Agent

01 Name
02 Street Address (P.O. Box Number is Not Acceptable)
03
04 City
05 FL
06 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1509, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE *Erna Luning* DATE 4/26/1995

12. OFFICERS AND DIRECTORS

TITLE P/D	NAME	STREET ADDRESS	CITY - ST - ZIP
	LUNING, ERNA	372 PAULUS CT.	BOCA RATON, FL. 33486-3122
TITLE V/D	NAME	STREET ADDRESS	CITY - ST - ZIP
	PENSA ALLAN	101 C MONACO	DELERAY BEACH, FL. 33446
TITLE V/D	NAME	STREET ADDRESS	CITY - ST - ZIP
	LUNING, REIN	471 ROYAL PALM WAY	BOCA RATON, FL. 33432
TITLE T/D	NAME	STREET ADDRESS	CITY - ST - ZIP
	HINNO, HARALD	336 N. BIRCH RD., APT. 7G	FT. LAUDERDALE, FL. 33304
TITLE S/D	NAME	STREET ADDRESS	CITY - ST - ZIP
	TOTSAS, LINDA	7105 NW 75 STREET	TAMARAC 33319
TITLE T/D	NAME	STREET ADDRESS	CITY - ST - ZIP
	KAEPA, HILDA	1340 S. OCEAN BLVD. APT. 2009	POMPANO BEACH, FL. 33062

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12 NAME	
13 STREET ADDRESS	
14 CITY - ST - ZIP	
21 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
22 NAME	
23 STREET ADDRESS	
24 CITY - ST - ZIP	
31 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
32 NAME	
33 STREET ADDRESS	
34 CITY - ST - ZIP	
41 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
42 NAME	
43 STREET ADDRESS	
44 CITY - ST - ZIP	
51 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
52 NAME	
53 STREET ADDRESS	
54 CITY - ST - ZIP	
61 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
62 NAME	
63 STREET ADDRESS	
64 CITY - ST - ZIP	

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14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(b), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 817, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *Erna Luning Pres.* ERNA LUNING DATE 4/26/95 TELEPHONE NO. (407) 392-1723