

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 24, 2007 8:00 am
Secretary of State

04-24-2007 90010 030 ****70.00

DOCUMENT # N16100 1. Entity Name ST. PETER'S EVANGELICAL LUTHERAN CHURCH OF ORANGE PARK, FLORIDA, INC.					
Principal Place of Business 1614 BLANDING BLVD. MIDDLEBURG FL 32068			Mailing Address 1614 BLANDING BLVD. MIDDLEBURG FL 32068		
2. Principal Place of Business - No P.O. Box # Suite, Apt. #, etc.		3. Mailing Address Suite, Apt. #, etc.			
City & State Zip		City & State Zip		Country	
4. FEI Number 59-2351739				Applied For ☐ Not Applicable	
5. Certificate of Status Desired ☒ \$8.75 Additional Fee Required				1st MOORE CR2E037 (10/06)	
6. Name and Address of Current Registered Agent MATTINGLY, DAN 1824 BLUEBONNET WAY ORANGE PARK FL 32003			7. Name and Address of New Registered Agent Name SCOTT KUKELHAN Street Address (P.O. Box Number is Not Acceptable) 3891 Main St City MIDDLEBURG FL 32068		
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 <i>Scott Kukelhan</i> Signature, typed or printed name of registered agent and title if applicable.		SIGNATURE <i>Scott Kukelhan</i> (NOTE: Registered Agent signature required when reinstating)		DATE 4/16/07	
FILE NOW: FEE IS \$61.25 Due By May 1, 2007		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 SNOW, BRIAN 6117 ISLAND FOREST DR ORANGE PARK FL 32003	☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D KANGAS, GARY 4615 TARRAGON AVE MIDDLEBURG FL 32068	☒ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	D KURT ENSALL 2455 CAMPHORWOOD CT. ORANGE PARK FL 32065 ☐ Change ☒ Addition	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	S BRADFIELD, NICKI 3764 SR 16 WEST GREEN COVE SPRINGS FL 32043	☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	C MCGOVERN, MICHAEL 4236 HALL BOREE RD MIDDLEBURG FL 32068	☒ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D MATTINGLY, DAN 1824 BLUEBONNET WAY ORANGE PARK FL 32003	☒ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	D MIKE NEWTON 1955 GARROD WAY ORANGE PARK FL 32003 ☐ Change ☒ Addition	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D KUKELHAN, SCOTT 1891 MAIN ST MIDDLEBURG FL 32068	☐ 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 Section 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 <i>Brian Snow</i> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		SIGNATURE <i>Scott Kukelhan</i> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		DATE 4/16/07 904-282-8876	