

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N21640

FILED  
May 18, 2007  
Secretary of State

Entity Name: SPIRIT OF JOY LUTHERAN CHURCH, INC.

**Current Principal Place of Business:**

1801 ROUSE ROAD  
ORLANDO, FL 32817 US

**New Principal Place of Business:**

**Current Mailing Address:**

1801 ROUSE ROAD  
ORLANDO, FL 32817 US

**New Mailing Address:**

FEI Number: 59-3490645      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

**Name and Address of Current Registered Agent:**

LINMAN, JEFFREY V  
13739 WATERHOUSE WAY  
ORLANDO, FL 32828 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: SD ( ) Delete  
Name: DECOSSE, KATHY  
Address: 13737 SUNSHOWER CIRCLE  
City-St-Zip: ORLANDO, FL 32828 US

Title: PD ( ) Delete  
Name: CONNORS, ERIN  
Address: 1018 OCEANBREEZE CT.  
City-St-Zip: ORLANDO, FL 32828 US

Title: TD ( ) Delete  
Name: TRITINGER, DENNIS  
Address: 14500 RIVIERA POINTE DRIVE  
City-St-Zip: ORLANDO, FL 32828 US

Title: VPD ( ) Delete  
Name: SCHNEIDER, MARK  
Address: 363 ISLE OF SKY CIRCLE  
City-St-Zip: ORLANDO, FL 32828 US

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: TD (X) Change ( ) Addition  
Name: HUSTON, DEREK  
Address: 426 POPLAR COURT  
City-St-Zip: MAITLAND, FL 32751 US

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: KATHY DECOSSE

SD

05/18/2007

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date