## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N33664

FILED Mar 13, 2009 Secretary of State

Entity Name: ST. PAUL EVANGELICAL LUTHERAN CHURCH OF FT. LAUDERDALE, FLORIDA, INC.

**Current Principal Place of Business: New Principal Place of Business:** 580 INDIAN TRACE FT LAUDERDALE, FL 33326 US **Current Mailing Address: New Mailing Address:** 580 INDIAN TRACE FT LAUDERDALE, FL 33326 US FEI Number: 65-0120346 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: STOKES, ALANA STOKES, ALANA ST. PAUL LUTHERAN CHUK ST. PAUL LUTHERAN CHURCH 580 INDIAN TRACE 580 INDIAN TRACE WESTON, FL 33326 US WESTON, FL 33326 US 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: 03/13/2009 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition BAKER, NANCY Name: Name: 1427 CAPRI LN #5012 Address: Address: City-St-Zip: WESTON, FL 33326 City-St-Zip: Title: ( ) Delete Title: () Change () Addition Name: STOKES, ALANA Name: Address: 811 HERITAGE DRIVE Address: City-St-Zip: WESTON, FL 33326 City-St-Zip: Title: () Delete Title: () Change () Addition STOVALL, TANIYA Name: Name: 1253 PEREGRINE WAY Address: Address: City-St-Zip: WESTON, FL 33327 City-St-Zip: Title: VΡ () Delete Title: () Change () Addition Name: GEORGE, RAY Name: Address: 2447 GREEBRIER CT Address: City-St-Zip: FORT LAUDERDALE, FL 33327 City-St-Zip: Title: FS () Delete Title: (X) Change ( ) Addition SCHMIDT, MIKE RAND, JOE Name: Name: 355 MALLARD RD 2687 CYPRESS LANE Address: Address: WESTON, FL 33327 City-St-Zip: City-St-Zip: WESTON, FL 33332

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: ALANA STOKES S 03/13/2009