

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# N35049

FILED
Jan 15, 2002 8:00 AM
Secretary of State

Entity Name: LUTHER VILLAGE OF TAMPA BAY, INCORPORATED

Current Principal Place of Business:

12703 N FLORIDA AVE
TAMPA, FL 33612 US

New Principal Place of Business:

12701 N FLORIDA AVE
TAMPA, FL 33612 US

Current Mailing Address:

12703 N FLORIDA AVE
TAMPA, FL 33612 US

New Mailing Address:

12701 N FLORIDA AVE
TAMPA, FL 33612 US

FEI Number: 59-3005474

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GRANTHAM, RANDALL C. ESQ.
1519 DALE MABRY HIGHWAY
SUITE 100
LUTZ, FL 33549 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: P () Delete
Name: SOLOMONSON, LARRY P PH.D
Address: 912 W. LUTZ LAKE FERN ROAD
City-St-Zip: LUTZ, FL 33549 US

Title: D () Delete
Name: GRAVEN, STANLEY
Address: 14930 LAKE FOREST DR
City-St-Zip: TAMPA, FL 33549 US

Title: T () Delete
Name: COPELAND, CHARLES T PH.D
Address: 11325 CARROLLWOOD ESTATES DRIVE
City-St-Zip: TAMPA, FL 33624 US

Title: D () Delete
Name: EHLKE, SANDY
Address: 14802 N. FLORIDA AVE., APT. I-131
City-St-Zip: TAMPA, FL 33613 US

Title: D () Delete
Name: FRANZEN, MARY ANN
Address: 512 HIBISCUS
City-St-Zip: TEMPLE TERRACE, FL 33617 US

Title: S () Delete
Name: EWANOSKI, STANLEY J PH.D
Address: 11513 RAVINE ROAD
City-St-Zip: TAMPA, FL 33612 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: ROBBINS, CYNTHIA S
Address: 4431 AVENUE CANNES
City-St-Zip: LUTZ, FL 33549 US

Title: D (X) Change () Addition
Name: GRAVEN, STANLEY
Address: 14930 LAKE FOREST DR
City-St-Zip: TAMPA, FL 33559 US

Title: D (X) Change () Addition
Name: GROSZ, PATRICIA PH.D
Address: 9330 FOREST HILLS DRIVE
City-St-Zip: TAMPA, FL 33612 US

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

Title: D (X) Change () Addition
Name: SOLOMONSON, LARRY P PH.D.
Address: 912 W. LUTZ LAKE FERN ROAD
City-St-Zip: LUTZ, FL 33549 US

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

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: PATRICIA L. GROSZ

D

01/15/2002

Electronic Signature of Signing Officer or Director

Date