

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N35049

FILED
Aug 01, 2006
Secretary of State

Entity Name: LUTHER VILLAGE OF TAMPA BAY, INCORPORATED

Current Principal Place of Business:

12701 N FLORIDA AVE
TAMPA, FL 33612 US

New Principal Place of Business:

Current Mailing Address:

12701 N FLORIDA AVE
TAMPA, FL 33612 US

New Mailing Address:

FEI Number: 59-3005474 **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:

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: T () Delete
Name: PULVER, MARJORIE M
Address: 4457 W HUMPHREY ST
City-St-Zip: TAMPA, FL 33614 US

Title: P () Delete
Name: WISE, JANET
Address: 1416 HOUNDS HOLLOW COURT
City-St-Zip: LUTZ, FL 33549 US

Title: S () Delete
Name: WILSON, APRIL
Address: 1146 DOGWOOD AVENUE
City-St-Zip: TAMPA, FL 33613 US

Title: VP () Delete
Name: LARUE, STEPHANIE
Address: 733 DEBBIE CIRCLE
City-St-Zip: TAMPA, FL 33613

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: T (X) Change () Addition
Name: PULVER, MARJORIE M
Address: 15742 SCRIMSHAW DR
City-St-Zip: TAMPA, FL 33624 US

Title: P (X) Change () Addition
Name: WILSON, APRIL
Address: 1146 DOGWOOD AVENUE
City-St-Zip: TAMPA, FL 33613 US

Title: S (X) Change () Addition
Name: WILEY, JANE
Address: 16233 PEBBLEBROOK DRIVE
City-St-Zip: TAMPA, FL 33624 US

Title: VP (X) Change () Addition
Name: CASTOR, MICKEY
Address: 13015 WHISPERING BAY PLACE
City-St-Zip: TAMPA, FL 33618

I hereby certify that the information supplied with this filing does not qualify for the 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: MARJORIE PULVER

T

08/01/2006

Electronic Signature of Signing Officer or Director

Date