## 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N47219

FILED Apr 26, 2005 Secretary of State

Entity Name: EPIPHANY LUTHERAN CHURCH, INC.

Current Principal Place of Business: New Principal Place of Business:

1498 TUSKAWILLA RD OVIEDO, FL 32765 US

Current Mailing Address: New Mailing Address:

1498 TUSKAWILLA RD OVIEDO, FL 32765 US

FEI Number: 59-3030590 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:

LEHNER, MARK A TREA.

2000 CHAPMAN OAKS DRIVE

OVIEDO, FL 32765 US

LEHNER, MARK A TREA.

203 MAGNOLIA PARK TRAIL

SANFORD, FL 32773 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: 04/26/2005

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Fitle: PD ( ) Delete Title: PD (X) Change ( ) Addition

 Name:
 RYSER, DENISE
 Name:
 OTTO, RICHARD

 Address:
 1707 LITTLEON CT
 Address:
 176 NANDINA TERR

City-St-Zip: WINTER SPRINGS, FL 32708 City-St-Zip: WINTER SPRINGS, FL 32708

 $\label{eq:title: VP (X) Change () Addition} \begin{picture} Title: & VP & (X) Change () Addition \\ \end{picture}$ 

 Name:
 OTTO, DICK
 Name:
 BALANOFF, GARY

 Address:
 1498 TUSCUWILLA BLVD
 Address:
 8202 MARGARITA DR

 City-St-Zip:
 OVIEDO, FL 32765
 City-St-Zip:
 ORLANDO, FL 32817

Title: SD () Delete Title: SD (X) Change () Addition

 Name:
 WILLIAMS, LÖREYNE
 Name:
 PINEDO-SEĞER, ERIKA

 Address:
 152 PEREGRINE CT
 Address:
 1014 KASELL PLACE

 City-St-Zip:
 WINTER SPRINGS, FL 32708
 City-St-Zip:
 OVIEDO, FL 32765

Title: TD () Delete Title: TD (X) Change () Addition

Name: LEHNER, MARK Name: LEHNER, MARK

Address: 2000 CHAPMAN OAKS DR Address: 203 MAGNOLIA PARK TRAIL
City-St-Zip: OVIEDO, FL 32765 City-St-Zip: SANFORD, FL 32773

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: MARK A LEHNER TREA 04/26/2005

Electronic Signature of Signing Officer or Director

Date