

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N94000004216

1. Entity Name

LUTHERAN CHURCH OF THE CROSS DAY SCHOOL, INC.

Principal Place of Business

4400 CHANCELLOR ST NE
ST. PETERSBURG FL 33703
US

Mailing Address

4400 CHANCELLOR ST NE
ST. PETERSBURG FL 33703
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-3295611

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

CARLSON, HOLLY C
588 TALLAHASSEE DR. NE
SAINT PETERSBURG FL 33702

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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

Holly C Carlson

8/8/01

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25
After September 12, 2001, min. will be \$236.25

9. Election Campaign Financing
Trust Fund Contribution.

☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE NAME STREET ADDRESS CITY-ST-ZIP	VCD KAPUSTA, ROBERT JR 4400 CHANCELLOR ST NE ST PETERSBURG FL 33703	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CD STROUD, CELESTE 4400 CHANCELLOR ST NE ST PETERSBURG FL 33703	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MAROIS, CHRIS 4400 CHANCELLOR ST NE ST PETERSBURG FL 33703	☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T HOOD, LISA 4400 CHANCELLOR ST NE ST PETERSBURG FL 33703	☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD SELBY, KAREN 4400 CHANCELLOR ST NE ST. PETERSBURG FL 33703	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D KOCH, CHARLENE 4400 CHANCELLOR ST NE ST. PETERSBURG FL 33703	☐ Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP	Rapusta, Robert Jr.	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VCD SILK, Robert 1988 Illinois Ave. NE St. Pete, FL 33703	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T Wilkins, Decann 1931 Kansas Ave NE St. Pete, FL 33703	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Celeste Stroud REQUIRED

8/16/01

FILED
Aug 22, 2001 8:00 am
Secretary of State

08-22-2001 90223 004 ****61.25



DO NOT WRITE IN THIS SPACE

CR2E037 (5/01)