2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# N94000004216

Entity Name: LUTHERAN CHURCH OF THE CROSS DAY SCHOOL, INC.

FILED Jan 09, 2002 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 4400 CHANCELLOR ST NE ST. PETERSBURG, FL 33703 US **Current Mailing Address: New Mailing Address:** 4400 CHANCELLOR ST NE ST. PETERSBURG, FL 33703 US FEI Number: 59-3295611 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: CARLSON, HOLLY C 588 TALLAHASSEE DR. NE SAINT PETERSBURG, FL 33702 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: Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Change () Addition () Delete KAPUSTA, ROBERT JR Name: Name: 4400 CHANCELLOR ST NE Address: Address: City-St-Zip: ST PETERSBURG, FL 33703 City-St-Zip: Title: CD () Delete Title: () Change () Addition STROUD, CELESTE Name: Name: Address: 4400 CHANCELLOR ST NE Address: City-St-Zip: ST PETERSBURG, FL 33703 City-St-Zip: Title: VCD () Delete Title: () Change () Addition SILK, ROBERT Name: Name: 1988 ILLINOIS AVENUE NE Address: Address: City-St-Zip: SAINT PETERSBURG, FL 33703 City-St-Zip: (X) Change () Addition Title: () Delete Title: Name: WILKENS, DECANN Name: WILKENS, DEANN 1931 KANSAS AVENUE NE Address: Address: 1931 KANSAS AVENUE NE City-St-Zip: SAINT PETERSBURG, FL 33703 City-St-Zip: SAINT PETERSBURG, FL 33703 Title: () Delete Title: () Change () Addition SELBY, KAREN Name: Name: 4400 CHANCELLOR ST NE Address: Address: City-St-Zip: ST. PETERSBURG, FL 33703 City-St-Zip: Title: () Delete Title: () Change () Addition KOCH, CHARLENE Name: Name: Address: 4400 CHANCELLOR ST NE Address: ST. PETERSBURG, FL 33703 City-St-Zip: 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: CELESTE STROUD CHAI 01/09/2002