2004 NOT-FOR-PROFIT CORPORATION

FILED Jan 26, 2004 8:00 am Secretary of State 01-26-2004 90060 007 ****61.25

ANNO	Se			
DOCUMENT # N94000 1. Entity Name LUTHERAN CHURCH OF THE INC.		01		
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			

ST. PETERSE	BURG, FL 33	703 US		PETERSBURG, FL 3								
2. Principal Place of Business 3. Ma		3. Ma	ailing Address									
Suite, Apt. #, etc.		St	Suite, Apt. #, etc.		01162004	Chg-NP	CR2E037	7 (10/03)				
City & State Ci			ity & State			4. FEI Number 59-329				oplied For		
Zip		Country	Zi	ρ	Country	~	5. Certificate	of Status Desire	٥ ا			
	6. Name	and Address of Current F	ı Reaister	ed Agent		7. Name and Address of New Registered Agent						
			-		Nar	Name						
CARLSON, HOLLY C 588 TALLAHASSEE DR. NE SAINT PETERSBURG, FL 33702						ss (P.O. Box Numbe	er is Not Accepta	able)				
		, .										
		* ** .			City				FL	Zip Cod	İ	
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. I am familiar with, and accept the obligations of registered agent. SIGNATURE												
Oldinizione .	Signature, typed	or printed name of registered agent ar	nd title if app	plicable. (NOTE:	Registered Agent	ignature requ	uired when reinstating)	<u> </u>	DATE		 	
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Filling Fee is \$61.25 9. Election Campaign Fir Due by May 1, 2004 Trust Fund Contribution					ontribution.	.º	\$5.00 May B Added to Fees	e	lorida Departi	nent of S	late.	
10.		· · OFFICERS AND DIRE	ECTORS		\$1,		ADDITIONS/CHA	NGES TO OFFI	CERS AND DIR	ECTORS IN	10	
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12. Thereby certify that the information supplied with this filling does not qualify for the exemption stated in Section							Sastian 110 07/03/	\ Flavida Ctatata	n 16 mil na a - 27	C. H. at the	-()	
TET THE LEGIS (conny mantine	a maogination supplied with t	រជន ពេកប្រ	luces not quality for	ure exemption	stated in	- Section + 19.07(3)(1), monua Statute	is. Trumner certif	v that the ir	normation [

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 likerempowered.

SIGNATURE: S