

2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# N94000004216

FILED
Jan 23, 2003
Secretary of State

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

Current Principal Place of Business:

4400 CHANCELLOR ST NE
ST. PETERSBURG, FL 33703 US

New Principal Place of Business:

Current Mailing Address:

4400 CHANCELLOR ST NE
ST. PETERSBURG, FL 33703 US

New Mailing Address:

FEI Number: 59-3295611

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CARLSON, HOLLY C
588 TALLAHASSEE DR. NE
SAINT PETERSBURG, FL 33702 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: D () Delete
Name: KAPUSTA, ROBERT JR
Address: 4400 CHANCELLOR ST NE
City-St-Zip: ST PETERSBURG, FL 33703

Title: CD () Delete
Name: STROUD, CELESTE
Address: 4400 CHANCELLOR ST NE
City-St-Zip: ST PETERSBURG, FL 33703

Title: VCD () Delete
Name: SILK, ROBERT
Address: 1988 ILLINOIS AVENUE NE
City-St-Zip: SAINT PETERSBURG, FL 33703

Title: T () Delete
Name: WILKENS, DEANN
Address: 1931 KANSAS AVENUE NE
City-St-Zip: SAINT PETERSBURG, FL 33703

Title: SD () Delete
Name: SELBY, KAREN
Address: 4400 CHANCELLOR ST NE
City-St-Zip: ST. PETERSBURG, FL 33703

Title: D () Delete
Name: KOCH, CHARLENE
Address: 4400 CHANCELLOR ST NE
City-St-Zip: ST. PETERSBURG, FL 33703

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: T (X) Change () Addition
Name: STEINMETZ, KAREN
Address: 4400 CHANCELLOR ST NE
City-St-Zip: ST PETERSBURG, FL 33703

Title: CD (X) Change () Addition
Name: SILK, ROBERT
Address: 1988 ILLINOIS AVENUE NE
City-St-Zip: SAINT PETERSBURG, FL 33703

Title: VCD (X) Change () Addition
Name: WILKENS, DEANN
Address: 1931 KANSAS AVENUE NE
City-St-Zip: SAINT PETERSBURG, FL 33703

Title: SD (X) Change () Addition
Name: CARMICHAEL, LORI
Address: 4400 CHANCELLOR ST NE
City-St-Zip: ST. PETERSBURG, FL 33703

Title: () Change () Addition
Name:
Address:
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: ROBERT SILK

CD

01/23/2003

Electronic Signature of Signing Officer or Director

Date