#### **2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N94000004216

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

FILED
Apr 08, 2019
Secretary of State
9553538370CC

### **Current Principal Place of Business:**

4400 CHANCELLOR ST NE ST. PETERSBURG, FL 33703

#### **Current Mailing Address:**

4400 CHANCELLOR ST NE ST. PETERSBURG. FL 33703 US

FEI Number: 59-3295611 Certificate of Status Desired: No

#### Name and Address of Current Registered Agent:

CARLSON, HOLLY C 4400 CHANCELLOR STREET N. E. SAINT PETERSBURG, FL 33703 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

#### Officer/Director Detail:

Title D, TRE	ASURER	Title	D
--------------	--------	-------	---

Name KAPUSTA, JR., ROBERT Name FINCH, LORA

Address 4400 CHANCELLOR ST NE Address 4400 CHANCELLOR ST. N.E.

City-State-Zip: ST PETERSBURG FL 33703 City-State-Zip: SAINT PETERSBURG FL 33703

Title S, D Title D

Name FRANZEE, MATHEW Name BELL, AMY

Address 4400 CHANCELLOR ST NE Address 4400 CHANCELLOR ST NE
City-State-Zip: ST. PETERSBURG FL 33703 City-State-Zip: ST. PETERSBURG FL 33703

Title VICE CHAIR & D Title C & D

Name STAPLETON, STACIE Name HIGMAN, LUCAS

Address 4400 CHANCELLOR ST NE Address 4400 CHANCELLOR ST NE
City-State-Zip: ST. PETERSBURG FL 33703 City-State-Zip: ST. PETERSBURG FL 33703

Title D Title [

Name GREENE, TOM Name HILLIER, TREVOR

Address 4400 CHANCELLOR ST NE Address 4400 CHANCELLOR ST NE
City-State-Zip: ST. PETERSBURG FL 33703
City-State-Zip: ST. PETERSBURG FL 33703

# Continues on page 2

I hereby 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 all other like empowered.

SIGNATURE: ROBERT KAPUSTA, JR.

**TREASURER** 

04/08/2019

## Officer/Director Detail Continued:

Title D

Name CUBLER, BRIAN

Address 4400 CHANCELLOR ST NE
City-State-Zip: ST. PETERSBURG FL 33703

Title D

Name SEIFRIED, SARA

Address 4400 CHANCELLOR ST NE
City-State-Zip: ST. PETERSBURG FL 33703

Title D

Name EVERIST, MISA

Address 4400 CHANCELLOR ST NE
City-State-Zip: ST. PETERSBURG FL 33703

Title D

Name HAMILTON, III, JOHN M

Address 4400 CHANCELLOR ST NE

City-State-Zip: ST. PETERSBURG FL 33703

Title D

Name DOUGLAS, JOY

Address 4400 CHANCELLOR ST NE
City-State-Zip: ST. PETERSBURG FL 33703