2002 UNIFORM BUSINESS REPORT (UBR)

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FILED
Apr 11, 2002 8:00 am
Secretary of State
03-20-2002 90031 024 ****70.00

DOCUMENT # 703812

1. Entity Name

APOSTLES LUTHERAN CHURCH OF BRANDON, FLORIDA, IN C.

Principal Place of Business	Mailing Address
200 N KINGSWAY ROAD BRANDON FL 33510	200 N KINGSWAY ROAD BRANDON FL 33510

DO NOT WRITE IN THIS SPACE

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 59-6553141 ☐ 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
BEISCKER, RON 2208 OAK CLIFF COURT VALRICO FL 33594	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 _____
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

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	V MANASCO, KAREN 1201 BRANDA VISTA DRIVE BRANDON FL 33511	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VICE PRES D BEILER, JASON 1104 DEXWELL CT BRANDON, FL 33511	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P PRESIDENT RENTZ, JOEL ~~TRACE~~ 3609 CINNAMON TRAVE DRIVE VALRICO FL 33594	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PRESIDENT D RENTZ, JOEL 3609 CINNAMON TRACE DR VALRICO, FL 33594	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T DIODATE, DAVID 1204 SANDELWOOD DR. PLANT CITY FL 33564	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TREASURER T HOCKEMEYER, KATHY 3716 TREELINE DR VALRICO, FL 33594	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D AGE, ROY 606 JULIE LANE BRANDON FL 33511	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	FINANCIAL SECRETARY D STERTZER, CHAR 3416 BENT OAK ST. VALRICO, FL 33594	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	~~BEILER, JASON VICE PRES~~ ~~1104 DEXWELL CT~~ ~~BRANDON, FL 33511~~	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SECRETARY D ZWYGART, SANDIE 2203 S. WATERMAN DR VALRICO, FL 33594	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

CR2E037 (9/01)

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: [signature] 1-21-02

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #