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Apr 30 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **705086** (7)

1. Corporation Name

FAITH EVANGELICAL LUTHERAN CHURCH OF DELAND FLORIDA, INC.

Principal Place of Business

Mailing Address

**509 E PENNSYLVANIA AVE.
DELAND FL 32724**

**509 E PENNSYLVANIA AVE.
DELAND FL 32724**

3. Date Incorporated or Qualified

01/21/1963

4. FEI Number

59-0914204

Applied For

Not Applicable

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**WHITE, BYRON W SR
1084 TORCHWOOD DR
DELAND FL 32724**

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	PD	☐ DELETE
NAME	STRUBLE, WAYNE D	
STREET ADDRESS	1785 NORTH OAK ST	
CITY-ST-ZIP	DELAND FL	
TITLE	VD	☒ DELETE
NAME	ALLEBACH, JAMES	
STREET ADDRESS	1060 ALHAMBRA ST	
CITY-ST-ZIP	DELTONA FL	
TITLE	S	☐ DELETE
NAME	STRUBLE, MARY LOU	
STREET ADDRESS	1785 NORTH OAK ST.	
CITY-ST-ZIP	DELAND FL 32724	
TITLE	T	☒ DELETE
NAME	MALONEY, FRANK	
STREET ADDRESS	607 CHERRY TREE LANE	
CITY-ST-ZIP	DELAND FL 32724	
TITLE	D	☐ DELETE
NAME	LARSON, LLOYD	
STREET ADDRESS	951 OAKWOOD RD	
CITY-ST-ZIP	ORANGE CITY FL	
TITLE	D	☒ DELETE
NAME	CORNWELL, JEAN	
STREET ADDRESS	600 E. MINNESOTA AVENUE	
CITY-ST-ZIP	DELAND FL 32724	

1.1 TITLE	☐ Change ☐ Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	☐ Change ☒ Addition
2.2 NAME	VD
2.3 STREET ADDRESS	BARICHIVICH, JOHN
2.4 CITY-ST-ZIP	1208 N. McDonald Avenue DeLand, Florida 32724
3.1 TITLE	☐ Change ☐ Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	☐ Change ☒ Addition
4.2 NAME	T
4.3 STREET ADDRESS	BURKEY, CHARLES A.
4.4 CITY-ST-ZIP	810 E. Wisconsin Avenue DeLand, Florida 32724
5.1 TITLE	☐ Change ☐ Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	☐ Change ☒ Addition
6.2 NAME	D
6.3 STREET ADDRESS	ALLEBACH, JAMES
6.4 CITY-ST-ZIP	1060 Alhambra Street Deltona, Florida 32725

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *Wayne D. Struble* *Wayne D. Struble* 4/20/98 784-5333

CR2E037 (10/97)