## 2001 UNIFORM BUSINESS REPORT (UBR)

## **DOCUMENT # 705086**

1. Entity Name

## FAITH EVANGELICAL LUTHERAN CHURCH OF DELAND INC.

Mailing Address

509 E PENNSYLVANIA AVE. DELAND EL 32724

509 E PENNSYLVANIA AVE.

**FILED** Apr 26, 2001 8:00 am Secretary of State

04-26-2001 90313 048 \*\*\*\*70.00

OLD III OL	· 6.7	DELAND FL 32/24							
				 	Na 1940 da arian andre arian sada arian sada	REBII BIBIS BEB	BIT BEBE BEB	(I S) 6 (   16 B)	
2. Principal Pl	ace of Business	3. Mailing Address	3. Mailing Address						
Suite, Apt. #, etc.		Suite, Apt. #, etc.	Strife Ant # etc						
		Saito, Apt. II, etc.			DO NOT WRITE IN	I THIS SPAC	JE		
City & State		City & State	City & State		4. FEI Number 59-0914204			plied For Applicable	
Zip	Country	Zip	Country	5. Certifica	5. Certificate of Status Desired XX \$8.75 Additional Fee Required			tional	
6. Name and Address of Current Registered Agent				7. Name at	nd Address of New Regis	1.00	•		
				Name					
WHITE, BYRON W SR 1064 TORCHWOOD DR				Street Address (P.O. Box Number is Not Acceptable)					
DELAND F	L 32724		City				Zio Codo		
						U'	Zip Code		
8. The above	named entity submits this staten	nent for the purpose of changing its re	egistered office or	registered agent, or I	ooth, in the state of Florida				
SIGNATURE									
	Signature, typed or printed name or registere	eo agent and title if applicable. (NOTE:	Registered Agent signati	ure required when reinstating)		DATE			
FILE NOW: 9. Election Campaign Financi				\$5.00 May Be Make Check Payable to					
	FEE IS \$61.25		· · · · · · · · · · · · · · · · · · ·		d to Fees Department of State			ļ	
10.	OFFICERS A	ND DIDECTORS							
TITLE	PD OFFICERS AI	ND DIRECTORS	11.	DT ADDITIONS/C	CHANGES TO OFFICERS A		TORS IN KChange		
NAME	STRUBLE, WAYNE D	□ Delete	NAME	Struble,	Wavne D.	454	, whattye	Addition	
STREET ADDRESS	1785 NORTH OAK ST		STREET ADDRESS	1785 Nort	h Oak Street	t			
CITY-ST-ZIP	DELAND FL VD		CITY-ST-ZIP	DeLand, F	lorida 32	2724			
TITLE NAME	BARICHIVICH, JOHN	<b>X</b> Delete	TITLE NAME	D Barichivi	ch. John	*3	<b>K</b> Change	☐ Addition	
STREET ADDRESS	1208 N MCDONALD AVEN	UE	STREET ADDRESS	621 Lante	rn Lane			İ	
CITY-ST-ZIP	DELAND FL 32724		CITY-ST-ZIP		ty, Florida	3278	3 3		
TITLE NAME	d Luman, ralph rev	☐ Delete	TITLE				] Change	Addition	
STREET ADDRESS	401 N MCDONALD AVENU	E	NAME STREET ADDRESS						
CITY-ST-ZIP	DELAND FL 32724		CITY-ST-ZIP						
TITLE	T CHARLES A	<b>₹</b> Delete	TITLE	PD			] Change	<b>X</b> Addition	
NAME STREET ADDRESS	BURKEY, CHARLES A 810 E WISCONSIN AVENU	E	NAME STREET ADDRESS	Sylvester 2131 Swan	, Chester				
CITY-ST-ZIP	DELAND FL 32724	<b>'</b>	CITY-ST-ZIP	Deltona,	son Drive Florida 3	32738			
TITLE	D	☐ Delete	TITLÉ				] Change	Addition	
NAME	LARSON, LLOYD		NAME				=		
STREET ADDRESS CITY-ST-ZIP	951 OAKWOOD RD ORANGE CITY FL		STREET ADDRESS CITY-ST-ZIP						
TITLE	D	***Delete	TITLE	VD -			] Change	X-X-Addition	
NAME	ALLEBACH, JAMES	-E3 4701010	NAME	Pajunen,	John		-	- F-43400111011	
STREET ADDRESS	1060 ALHAMBRA STREET		STREET ADDRESS	Post Offi	ce Box 2812 lorida 321	701 07	070		
CITY-ST-ZIP	DELTONA FL 32725		CITY-ST-ZIP	herana, t	rorida 327	/ Z T <del>-</del> Z {	<b>3</b> ⊥∠		

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 repeiver 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 attackprient with an address, with all other like empowered.

SIGNATURE

Chester Sylvester President SIGNATURE AND TYPES OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

April 18, 2001 386-574-5257

Daytime Phone #