

FILE NOW: FILING FEE AFTER MAY 1 IS \$155.00

CORPORATION ANNUAL REPORT 1995

FLORIDA DEPARTMENT OF STATE
Sandra B. Norman
Secretary of State
DIVISION OF CORPORATIONS



FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 APR 12 PM 12:16

DOCUMENT # 710773 (3)
1. Corporation Name
IMMANUEL LUTHERAN CHURCH, INC.

Principal Place of Business: 1449 34 STREET NORTH WEST, WINTER HAVEN FL 33881-8903
Mailing Address: 1449 34 STREET NORTH WEST, WINTER HAVEN FL 33881-8903

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 04/22/1966
3a. Date of Last Report: 04/06/1994
4. FEI Number: 59-6046582
5. Certificate of Status Desired: \$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution: \$5.00 May Be Added to Fees
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status: \$68.75 Supplemental Fee Not Required
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes: Yes No

2. Principal Place of Business (21-24)
2a. Mailing Address (25-28)
21-22: Suite, Apt. #, etc.
23: City & State
24: Zip, Country
25-26: Suite, Apt. #, etc.
27: City & State
28: Zip, Country

9. Name and Address of Current Registered Agent
BELL, JAMES R.
110 PERRY AVE.
AUBURNDALE, FL
WINTER HAVEN FL 33823

10. Name and Address of New Registered Agent
81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City
85 Zip Code

11. Pursuant to the provisions of Sections 607.05(1)(b) and 607.05(1)(c), 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 607.0505, Florida Statutes.
SIGNATURE: *James R. Bell* DATE: 4-5-95

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE: V	WEIS, JOHN 8203-83 SUN SPRING CIRCLE ORLANDO FL	1.1 TITLE: <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	ISSITT, BILL Sr
TITLE: D	WEIS, PAUL 803 15 ST SW WINTER HAVEN FL 33880	1.2 NAME	2390 LAKEVIEW W AINES CITY, FL 33844
TITLE: Y	BELL, JAMES R 110 PERRY AVE. AUBURNDALE FL 33823	1.3 STREET ADDRESS	
TITLE: D	KUEHNE, RICHARD C. 3189 AVE. M, N.W. WINTER HAVEN FL 33881	1.4 CITY-ST-ZIP	
TITLE: SD	BATES, TOM P. O. BOX 620785 N/A ORLANDO FL	2.1 TITLE	
TITLE: P	SCHALLER, MARK 702 HEMENWAY DR NW WINTER HAVEN FL	2.2 NAME	
		2.3 STREET ADDRESS	
		2.4 CITY-ST-ZIP	
		3.1 TITLE	
		3.2 NAME	
		3.3 STREET ADDRESS	
		3.4 CITY-ST-ZIP	
		4.1 TITLE	
		4.2 NAME	
		4.3 STREET ADDRESS	
		4.4 CITY-ST-ZIP	
		5.1 TITLE	
		5.2 NAME	REAM, DARRIN
		5.3 STREET ADDRESS	124 GRADY POLK RD SW
		5.4 CITY-ST-ZIP	WINTER HAVEN, FL 33880
		6.1 TITLE	
		6.2 NAME	JAEHNIGEN, ROLF
		6.3 STREET ADDRESS	1314 28 ST NW
		6.4 CITY-ST-ZIP	WINTER HAVEN, FL 33881

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(k), 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: *James R. Bell* DATE: 4-5-95 (813)534-0350