

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Mar 14, 2007 8:00 am
Secretary of State

03-14-2007 90045 040 ****61.25

DOCUMENT # 719323 1. Entity Name FAITH LUTHERAN CHURCH, INC., SEBRING, FLORIDA					
Principal Place of Business 2740 LAKEVIEW DRIVE SEBRING FL 33870-2300				Mailing Address 2740 LAKEVIEW DRIVE SEBRING FL 33870-2300	
2. Principal Place of Business - No P.O. Box #		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State		4. FEI Number 59-1311263 Applied For Not Applicable	
Zip	Country	Zip	Country	5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent DISLER, MICHAEL 329 SOUTH COMMERCE AVENUE SEBRING FL 33870				7. Name and Address of New Registered Agent 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) _____ DATE _____ Signature, typed or printed name of registered agent and title if applicable.					
FILE NOW: FEE IS \$61.25 Due By May 1, 2007		9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees		Make Check Payable to Florida Department of State	
10. OFFICERS AND DIRECTORS				11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	DP FLETCHER, MARION (TEX) 3803 PONCE DE LEON BLVD SEBRING FL 33872	☒ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	DP STORLIE, LYLE 344 BAY STREET #5 SEBRING, FL 33870-3805	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	DV HENRY, WILSON TED 1701 PYE DR SEBRING FL 33870-2045	☒ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	DS WILFONG, MATHILDA 211 LARK AVE SEBRING FL 33872-3529	☒ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	DS HAVENER, KAYE 1903 E CLARADGE AVE AVON PARK, FL 33825	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	DT KAPHINGST, VERNICE 3908 WILD VIOLET AVE SEBRING FL 33870-1189	☒ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	DT SCHEER, EDITH E 504 E CIRCLE ST AVON PARK, FL 33825	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	DE MEYER, ARTHUR 105 WHATLEY BLVD SEBRING FL 33872-3753	☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP		☐ Change ☐ Addition
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, 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: <i>Edith E Scheer</i> Edith E Scheer, Treasurer <i>3/6/07</i> 863-385-7848 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR					