

**FILE NOW: FILING FEE IS \$61.25**

**FILED**  
**Apr 23 1998 8:00am**  
**Secretary of State**

NONPROFIT CORPORATION ANNUAL REPORT <b>1998</b>		FLORIDA DEPARTMENT OF STATE <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS
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**DOCUMENT # 724687 (9)**  
 1. Corporation Name  
**THE LUTHERAN CHURCH OF THE REDEEMER INC.**



Principal Place of Business <b>800 27TH AVE VERO BCH FL 32960</b>	Mailing Address <b>800 27TH AVE VERO BCH FL 32960</b>
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3. Date Incorporated or Qualified <b>10/31/1972</b>		
4. FEI Number <b>23-7161038</b>	Applied For <input type="checkbox"/>	Not Applicable <input type="checkbox"/>
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75 Additional Fee Required</b>	
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	<b>\$5.00 May Be Added to Fees</b>	
7. Is this nonprofit corporation a homeowners association? <input type="checkbox"/> Yes <input type="checkbox"/> No		
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No		

21. Principal Place of Business	2a. Mailing Address
22. Suite, Apt. #, etc.	2b. Suite, Apt. #, etc.
23. City & State	27. City & State
24. Zip	28. Zip
25. Country	29. Country
30. Country	

9. Name and Address of Current Registered Agent  
**DEYTER, AL  
 6902 DONLON RD  
 N106  
 FT. PIERCE FL 34951**

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 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]* **TREASURER** DATE: **1/24/98**

12. OFFICERS AND DIRECTORS

TITLE	<b>P</b>	<input type="checkbox"/> DELETE
NAME	<b>DEYTER, AL - TREASURER</b>	
STREET ADDRESS	<b>6902 DONLON RD</b>	
CITY-ST-ZIP	<b>FT. PIERCE FL</b>	
TITLE	<b>VPO</b>	<input checked="" type="checkbox"/> DELETE
NAME	<b>ARNDE, GEORGE</b>	
STREET ADDRESS	<b>25 PINE ARBOR LANE, #202</b>	
CITY-ST-ZIP	<b>VERO BCH. FL</b>	
TITLE	<b>TD</b>	<input checked="" type="checkbox"/> DELETE
NAME	<b>ORETH, A</b>	
STREET ADDRESS	<b>3920 7TH STREET</b>	
CITY-ST-ZIP	<b>VERO BEACH FL</b>	
TITLE	<b>S</b>	<input checked="" type="checkbox"/> DELETE
NAME	<b>HINLUCKY, GEORGE</b>	
STREET ADDRESS	<b>8775 - 20TH ST #267</b>	
CITY-ST-ZIP	<b>VERO BEACH FL</b>	
TITLE	<b>S</b>	<input type="checkbox"/> DELETE
NAME	<b>ABELINE, DORIS</b>	
STREET ADDRESS	<b>6539 TERESIA CT</b>	
CITY-ST-ZIP	<b>FT. PIERCE FL</b>	
TITLE	<b>PD</b>	<input checked="" type="checkbox"/> DELETE
NAME	<b>KUDDLE, RAYMOND C</b>	
STREET ADDRESS	<b>185 12TH AVE</b>	
CITY-ST-ZIP	<b>VERO BEACH FL</b>	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	<b>JIM WADE - PRES</b> <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	<b>1100 PONCE DELEON</b>
2.4 CITY-ST-ZIP	<b>VERO BEACH FL 32960</b>
3.1 TITLE	<b>JOAN NEUBAUER</b> <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	<b>7300 - 20 ST #619</b>
3.4 CITY-ST-ZIP	<b>VERO BEACH FL 32966</b>
4.1 TITLE	<b>GEORGE FREDERICKS - PRES</b> <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	<b>927 WEMLOCK ST</b>
4.4 CITY-ST-ZIP	<b>BAREFOOT BAY, FL 32976</b>
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

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, changed, or on an attachment with an address.

SIGNATURE: *[Signature]* **AL DEYTER** DATE: **1/24/98** (561) 464-0722

CR2E037 (10/97)