

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 28, 2000 8:00 am
Secretary of State

03-28-2000 90049 009 ****61.25

DOCUMENT # 732693

1. Entity Name

FAITH LUTHERAN CHURCH OF ROTONDA/WEST, FLORIDA,

Principal Place of Business

Mailing Address

ROTONDA BLVD WEST
 ROTONDA WEST FL 33947

ROTONDA BLVD WEST
 ROTONDA WEST FL 33947

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

58-1461378

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
 Fee Required.



DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

KELLY, CARL F.
551 ROTONDA BLVD WEST
ROTONDA/WEST FL 33947

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.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW:
SEE IS \$61.25

9. Election Campaign Financing
 Trust Fund Contribution.

\$5.00 May Be
 Added to Fees

Make Check Payable to
Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	DP	<input type="checkbox"/> Delete
NAME	BENNETT, LINDA	
STREET ADDRESS	264 ROTONDA CIRCLE	
CITY-ST-ZIP	ROTONDA WEST FL 33947	
TITLE	D	<input type="checkbox"/> Delete
NAME	NUGENT, LEE	
STREET ADDRESS	1740 NEW POINT COMFORT RD	
CITY-ST-ZIP	ENGLEWOOD FL 34223	
TITLE	D	<input type="checkbox"/> Delete
NAME	SEMENTUH, CLEM	
STREET ADDRESS	2033 PENNSYLVANIA AVE	
CITY-ST-ZIP	GLOVE CITY FL 34224	
TITLE	DS	<input type="checkbox"/> Delete
NAME	WHITEHEAD, SAM	
STREET ADDRESS	9291 LAKE DR	
CITY-ST-ZIP	ENGLEWOOD FL 34224	
TITLE	S	<input type="checkbox"/> Delete
NAME	SEMENTUH, SHIRLEY	
STREET ADDRESS	2033 PENNSYLVANIA AVE.	
CITY-ST-ZIP	GROVE CITY FL 34224	
TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	HOOPS, CYNDY	
STREET ADDRESS	9332 SAN BERNARDINO	
CITY-ST-ZIP	ENGLEWOOD FL 34224	

TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Merrilee Warner	
STREET ADDRESS	125 Bunker Rd	
CITY-ST-ZIP	Rotonda West, FL 33947	
TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Glenn Mauston	
STREET ADDRESS	4634 Arlington Dr	
CITY-ST-ZIP	Cape Haze, FL 33946	
TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Ted Simis	
STREET ADDRESS	6025 Mangosita Key Rd	
CITY-ST-ZIP	Englewood, FL 34223	
TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Claire Miller	
STREET ADDRESS	7324 Beardslay St	
CITY-ST-ZIP	Englewood, FL 34224	
TITLE	DT	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Sharon Bean	
STREET ADDRESS	7104 Castilla St.	
CITY-ST-ZIP	Port Charlotte, FL 33981	
TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Bruce Miller	
STREET ADDRESS	26 Sportsman Pl	
CITY-ST-ZIP	Rotonda West, FL 33947	

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 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:

SIGNATURE OF Sam Whitehead

2/18/00 (941) 460 0308

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (9/99)

152693

00046742

ATTACHMENT TO ANNUAL REPORT

Title: D

Name: Bob Gschwend

Street Address: 64 Mark Twain Lane

City, State, Zip: Rotonda West, FL 33947