SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997
AMOUNT DUE ON OR BEFORE 9/17/97: $61.25 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: $236.25).

FILED
Aug 07 1997 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT **1997**

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

DOCUMENT # N03059 (5)

1. Corporation Name
JOY LUTHERAN CHURCH OF PALM BAY, INC.

Principal Place of Business	Mailing Address
3174 JUPITER BLVD., S.E. PALM BAY FL 32909	3174 JUPITER BLVD., S.E. PALM BAY FL 32909

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 05/14/1984
3a. Date of Last Report: 04/30/1996

2. Principal Place of Business — 21:
2a. Mailing Address — 26:
Suite, Apt. #, etc. — 22:
Suite, Apt. #, etc. — 27:
City & State — 23:
City & State — 28:
Zip — 24: Country — 25:
Zip — 29: Country — 30:

4. FEI Number: 59-2372549 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

DIXON, WILLIAM H.
233 N.W. PALM BAY RD
PALM BAY FL 32905

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City **FL** 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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	V	☒ DELETE	1.1 TITLE	P/D	☒ Change ☐ Addition
NAME	HARKINS, CAROL		1.2 NAME	Michael Pescor	
STREET ADDRESS	1051 UTAH ST SE		1.3 STREET ADDRESS	913 Ripley Terrace NE	
CITY-ST-ZIP	PALM BAY FL		1.4 CITY-ST-ZIP	Palm Bay, FL 32907	
TITLE	SD	☒ DELETE	2.1 TITLE	VP/TR	☒ Change ☐ Addition
NAME	MUNRO, PAULA		2.2 NAME	Evelyn Richmond	
STREET ADDRESS	1381 ERLING AVENEU NW		2.3 STREET ADDRESS	326 Krassner Drive NW	
CITY-ST-ZIP	PALM BAY FL		2.4 CITY-ST-ZIP	Palm Bay, FL 32907	
TITLE	D	☒ DELETE	3.1 TITLE	T	☒ Change ☐ Addition
NAME	FORD, ROXIE		3.2 NAME	Annie Smith	
STREET ADDRESS	800 GELASO STREET SW		3.3 STREET ADDRESS	2348 Bent Pine Dr.	
CITY-ST-ZIP	PALM BAY FL		3.4 CITY-ST-ZIP	West Melbourne, FL 32904	
TITLE	P	☒ DELETE	4.1 TITLE	S	☒ Change ☐ Addition
NAME	HARKINS, CAROL		4.2 NAME	Alan DeFrances	
STREET ADDRESS	5607 WOOD STORK LANE		4.3 STREET ADDRESS	1317 Prum Avenue NW	
CITY-ST-ZIP	GRANT FL		4.4 CITY-ST-ZIP	Palm Bay, FL 32907	
TITLE	TD	☒ DELETE	5.1 TITLE	TR	☒ Change ☐ Addition
NAME	HARKINS, WENDY		5.2 NAME	Kathie Querry	
STREET ADDRESS	5607 WOOD STORK LANE		5.3 STREET ADDRESS	571 Bluefields Street SE	
CITY-ST-ZIP	GRANT FL		5.4 CITY-ST-ZIP	Palm Bay, FL 32909	
TITLE		☒ DELETE	6.1 TITLE		☐ Change ☐ Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP			6.4 CITY-ST-ZIP		

CR2E037 (4/97)

14. I do 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 if changed, or on an attachment with an address.

SIGNATURE: SIGNATURE REQUIRED 8/4/97 407