

FILE NOW: FILING FEE IS \$61.25

FILED

Mar 31 1997 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # N06736 (5) 1. Corporation Name FOREST OAKS LUTHERAN CHURCH OF SPRING HILL, FLORIDA, INC.	
Principal Place of Business 8555 FOREST OAKS BLVD. SPRING HILL FL 34806	Mailing Address 8555 FOREST OAKS BLVD. SPRING HILL FL 34806-6849



3. Date Incorporated or Qualified 12/25/1984		3a. Date of Last Report 03/04/1996	
2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip Country 24		2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip Country 29	
4. FEI Number 59-2383020		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 has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☐ No			

9. Name and Address of Current Registered Agent BLACKBURN, GENE 13225 JESSICA DR. SPRING HILL FL 34809		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	
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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 Gene Blackburn DATE 3-19-97

(NOTE: Registered Agent signature required when reappointing)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD	1.1 TITLE	☐ Change ☐ Addition
NAME	BLACKBURN, GENE	1.2 NAME	
STREET ADDRESS	13225 JESSICA DR.	1.3 STREET ADDRESS	
CITY-ST-ZIP	SPRING HILL FL 34809	1.4 CITY-ST-ZIP	
TITLE	VD	2.1 TITLE	☐ Change ☐ Addition
NAME	WISENER, ARTHUR	2.2 NAME	
STREET ADDRESS	8381 WARBLER RD.	2.3 STREET ADDRESS	
CITY-ST-ZIP	BROOKSVILLE FL 34613	2.4 CITY-ST-ZIP	
TITLE	TD	3.1 TITLE	☐ Change ☐ Addition
NAME	SEELBACH, ROBERT	3.2 NAME	
STREET ADDRESS	8181 PHILATELIC DR.	3.3 STREET ADDRESS	
CITY-ST-ZIP	SPRING HILL FL	3.4 CITY-ST-ZIP	
TITLE	TD	4.1 TITLE	☒ Change ☐ Addition
NAME	NIBERT, MARILYN	4.2 NAME	
STREET ADDRESS	3135 SAW MILL LN.	4.3 STREET ADDRESS	
CITY-ST-ZIP	SPRING HILL FL 34806	4.4 CITY-ST-ZIP	
TITLE	TD	5.1 TITLE	☐ Change ☒ Addition
NAME	MIELKE, DONALD	5.2 NAME	
STREET ADDRESS	8085 SUMMERSONG CT.	5.3 STREET ADDRESS	
CITY-ST-ZIP	SPRING HILL FL 34806	5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	☐ Change ☐ Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	
TITLE		7.1 TITLE	☐ Change ☐ Addition
NAME		7.2 NAME	
STREET ADDRESS		7.3 STREET ADDRESS	
CITY-ST-ZIP		7.4 CITY-ST-ZIP	
TITLE		8.1 TITLE	☐ Change ☐ Addition
NAME		8.2 NAME	
STREET ADDRESS		8.3 STREET ADDRESS	
CITY-ST-ZIP		8.4 CITY-ST-ZIP	

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: Gene Blackburn, Pres. DATE 3-19-97 DAYTIME PHONE # 352-683-9731

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E037 (9/96)