FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N18227

Corporation Name

THE MARTIN LUTHER CHAPEL FOUNDATION, INC.

Principal Place of Busin
% WILLIAM BRUSICK
2658 YELLOWTAIL DR.
MARATHON FL 33050

2. Principal Place of Business

Mailing Address

% WILLIAM BRUSICK 2658 YELLOWTAIL DR. MARATHON FL 33050

2a. Mailing Address

FILED Feb 20, 1999 8:00 am Secretary of State

02-20-1999 90147 022 ****61.25

* 887064...90147...224 *



3. Date Incorporated or Qualifed

City & State City & State City & State City & State 5. Certificate of Status Desired Fee Requ Fee Requ Country Co	oplicable itional red y Be
27 S9-2755102 Not A City & State Country Countr	itional red y Be
City & State City & State 28 Zip Country Zip Country 29 29 30 Trust Fund Contribution Status Desired Fee Requirements of New Registered Agent 9. Name and Address of Current Registered Agent 5. Certificate of Status Desired Fee Requirements of Status Desired Fee Requir	red y Be
Zip Country Zip Country 6. Election Campaign Financing S5.00 March 24 25 29 30 Trust Fund Contribution Added to Fee Requirements of Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent	у Ве
Zip Country Zip Country 6. Election Campaign Financing \$5.00 Mag. Trust Fund Contribution Added to 19. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent	
24 25 29 30 Trust Fund Contribution Added to 1 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent	ees
Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent	
81 Name	
BRUSICK, WILLIAM 82 Street Address (P.O. Box Number is Not Acceptable)	
	}
2628 YELLOWTAIL NAPATHON CL 20050	
MARATHON FL 33050	
84 City FL 85 Zip Co	6
40 Care CAT AFOO and GAT AFOO Cloudes the above pamed comporation submits this statement for the purpose of changing its re	istered
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 regis	ered
agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.	
SIGNATURE Signature byted or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when relinstating) 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
Channe	Addition
- Ovr	
OCLINO, NCIL	
STREET ADDRESS 312 E SEAVIEW DR 1.3 STREET ADDRESS	
CITY-ST-ZIP MARATHON FL 14 CITY-ST-ZIP Change	Addition
TILE ID	
NAME BRUSICK, WILLIAM 22 NAME	
STREET ADDRESS 2658 YELLOWTRAIL DRIVE 2.3 STREET ADDRESS 2.3 STREET ADDRESS	1
CITY-ST-ZIP MARATHON FL 2.4 CITY-ST-ZIP	C 4 4 4 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
TITLE DS DELETE 3.1 TITLE Change	☐ Addition
NAME LALLATHIN, BEULAH 32 NAME	
STREET ADDRESS 751 98TH ST OCEAN 3.3 STREET ADDRESS	
CITY-ST-ZIP MARATHON FL 34. CITY-ST-ZIP	
TITLE DP DELETE 4.1 TITLE	☐ Addition
NAME WARNER, RICHARD E. 4.2 NAME	
STREET ADDRESS 57365 MORTON ST 4.3 STREET ADDRESS	
CITY-ST-ZIP MARATHON FL 44 CITY-ST-ZIP	
TITLE DELETE 5.1 TITLE Change	Addition
NAME 5.2 NAME	
STREET ADDRESS 5.3 STREET ADDRESS	- 1
CITY-ST-ZIP 54 CITY-ST-ZIP	
TITLE DELETE 6.1 TITLE Change	Addition
NAME 62 NAME	
STREET ADDRESS 6.3 STREET ADDRESS	
64 CTV ST 7/D	
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 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 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 supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(ii), Florida Statutes. I further certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(ii), Florida Statutes. I further certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(ii), Florida Statutes. I further certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(ii), Florida Statutes.	mation

4. 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 if changed, or on an attachment within an address, with all other like empowered.

SIGNATURE:

CONTROL OF PROTECTION OF SIGNING OFFICER OR DIRECTOR

Daytime Phone #

CR2E037 (11/