

FILE NOW: FILING FEE IS \$61.25

FILED

Feb 07 1997 8:00am  
Secretary of StateNONPROFIT  
CORPORATION  
ANNUAL REPORT  
1997FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # 711416 (8)

1. Corporation Name

FAITH LUTHERAN CHURCH, INC.

Principal Place of Business

Mailing Address

% STEPHEN P WINEMILLER  
7750 BENEVA RD  
SARASOTA FL 34238% STEPHEN P WINEMILLER  
7750 BENEVA RD  
SARASOTA FL 34238-29483. Date Incorporated or Qualified  
08/30/19663a. Date of Last Report  
03/08/1996

2. Principal Place of Business

2a. Mailing Address

21 Same as above.

26 Same as above.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 City &amp; State

27 City &amp; State

23 Zip Country

28 Zip Country

24

25

29

30

4. FEI Number

59-1170441

Applied For

Not Applicable

5. Certificate of Status Desired

☐\$8.75 Additional  
Fee Required6. Election Campaign Financing  
Trust Fund Contribution☐\$5.00 May Be  
Added to Fees8. This corporation has liability for intangible tax under s. 199.032,  
Florida Statutes☐ Yes☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

WEINMILLER, STEPHEN P  
7750 BENEVA RD  
SARASOTA FL 34238

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE SD ☒ DELETE  
NAME POLK, HELEN  
STREET ADDRESS 4515 LAKE VISTA DRIVE  
CITY-ST-ZIP SARASOTA FL1.1 TITLE Secretary ☒ Change ☐ Addition  
1.2 NAME Constance Rice  
1.3 STREET ADDRESS 3941 Chaucer Lane  
1.4 CITY-ST-ZIP Sarasota, FL 34241TITLE VP ☒ DELETE  
NAME RODI, TED  
STREET ADDRESS 6222 RODGERS AVENUE  
CITY-ST-ZIP SARASOTA FL2.1 TITLE President ☒ Change ☐ Addition  
2.2 NAME Rodi, Ted  
2.3 STREET ADDRESS 6222 Rodgers Avenue  
2.4 CITY-ST-ZIP Sarasota, FLTITLE TD ☐ DELETE  
NAME KAYSER, BETTY  
STREET ADDRESS 7294 CLOISTER DRIVE #11  
CITY-ST-ZIP SARASOTA FL3.1 TITLE ☐ Change ☐ Addition  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIPTITLE SD ☐ DELETE  
NAME DENNIS, WALTER  
STREET ADDRESS 3617 FENWAY DR.  
CITY-ST-ZIP SARASOTA FL4.1 TITLE ☐ Change ☐ Addition  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIPTITLE P ☒ DELETE  
NAME OSWALD, EDWARD  
STREET ADDRESS 8443 WOODBRIAR DRIVE  
CITY-ST-ZIP SARASOTA FL5.1 TITLE Vice President ☒ Change ☐ Addition  
5.2 NAME Ryan, John  
5.3 STREET ADDRESS 1433 Maple Street  
5.4 CITY-ST-ZIP Nokomis, FL 34275TITLE SPD ☐ DELETE  
NAME WINEMILLER, STEPHEN P  
STREET ADDRESS 704 N. PORTIA STREET  
CITY-ST-ZIP NOKOMIS FL 342756.1 TITLE ☐ Change ☐ Addition  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 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: *S. P. Winemiller* S. P. Winemiller, Pastor

2/3/97

941-924-4664

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E037 (9/96)