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 # 769113

SOUTHERN LUTHERAN ACADEMY ASSOCIATION, INC.

Principal Place of Business

Mailing Address

2a. Mailing Address

992 CHASE HAMMOCK ROAD MERRITT ISLAND FL 32953-7703

2. Principal Place of Business

992 CHASE HAMMOCK ROAD MERRITT ISLAND FL 32953-7703



05-08-1999 90049 050 ****61.25



3. Date Incorporated or Qualifed

06/27/1983

City & State City & State 5. Certificate of Status Desired Fee Required Zip Country Country Country 6. Election Campaign Financing \$5.00 May Be	Z1		20							
City & State 23	Suite, Apt.	#, etc.		te, Apt. #, etc.				<u> </u>		
27 Country Zip Country Country Zip Country Country Zip Country Country Zip Country Zip Country Country Zip Country Zip Country Zip Country Zip Country Zip Country Zip	22					39 200 1070				
Zip		····				5. Certifcate of Status I	Desired			
25						6. Election Campaign F	inancing _	\$5:00	May Be	
10. Name and Address of New Registered Agent	24	25	29	30		Trust Fund Contribut	ion	Added to	Fees	
WICHMANN, LEON 992 CHASE HAMMOCK RD. MERRITT ISLAND FL 32983 84 City FL 85 Zip Code 11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statuties, the above-named corporation submits this statement for the purpose of changing its registered agent, and accept the obligations of, Section 617.0502 florida Statuties, the above-named corporation submits this statement for the purpose of changing its registered agent, and accept the obligations of, Section 617.050.0 florida Statuties. SIGNATURE Significant, typed or private terms of registered appear and title if appealance. (NOTE Registered Apper Separate registered appear and title appealance.) (NOTE Registered Apper Separate register appears and title appealance.) (NOTE Registered Apper Separate register.) TITLE PD		9. Name and Address of Current	Registered Agent			10. Name and Address	of New Registere	d Agent		
992 CHASE HAMMOCK RD. MERRITT ISLAND FL 32953 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 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 and accept the obligations of, Section 617,0502, Florida Statutes. SIGNATURE SIGNATURE SIGNATURE SIGNATURE SIGNATURE OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. NAME 13. TITLE PD KYE *** CITY-ST-2P FALL ST. ST. US HELY 27 Lee's bury 5, FL 34, 74, 87 - 90.4 4 Lee's bury 5, FL 34, 87 - 90.4 4 Lee's bury 5, FL 34, 87 - 90.4 4 Lee's bury 5, FL 34, 87 - 90.4 4				81	Name					
992 CHASE HAMMOCK RD. MERRITT ISLAND FL 32953 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 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 and accept the obligations of, Section 617,0502, Florida Statutes. SIGNATURE SIGNATURE SIGNATURE SIGNATURE SIGNATURE OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. NAME 13. TITLE PD KYE *** CITY-ST-2P FALL ST. ST. US HELY 27 Lee's bury 5, FL 34, 74, 87 - 90.4 4 Lee's bury 5, FL 34, 87 - 90.4 4 Lee's bury 5, FL 34, 87 - 90.4 4 Lee's bury 5, FL 34, 87 - 90.4 4					92 Street Address (D.O. Boy Number is Not Assentable)					
MERRITT ISLAND FL 32953 84					Street Address (F.O. Box Notifiber is Not Acceptable)					
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 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, 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, and accept the objection of 17.0503, Florida Statutes. SIGNATURE SIGNATURE SIGNATURE SIGNATURE OFFICERS AND DIRECTORS 13. ADDITIONSCHANGES TO OFFICERS AND DIRECTORS IN 12. TITLE. DD OFFICERS AND DIRECTORS IN 12. 1.1 TITLE PD KYE**L** NAME POPE, JAMES F. 3012 18TH AVE., WEST 1.3 STREET ADDRESS STREET ADD							/			
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11. Pursuant to the provisions of Sections 617.6502 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 Statute of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent and time of negative and negative and time of negative and negative and time of negative and negative an				84	City		F		ode	
office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's poard of directors. I hereby accept the approximent as registated agent and mark of registered agent and mark	44 - 5	to the province of Sections 617 0500	and 617 1509 Florida Statute	s the above	_named co	moration submits this stateme			registered	
12.	office or r agent. I a	egistered agent, or both, in the State of im familiar with, and accept the obligation	Florida. Such change was au ons of, Section 617.0503, Flori	ithorized by ida Statutes	the corpora	ition's board of directors. I hel	еру ассерт тпе арт	pointment as rec	gistered	
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	14. hereby	I certify that the information supplied with	this filing does not qualify for			Section 119.07(3)(i), Florida	Statutes. I further	certify that the in	formation	

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, with all other like empowered.