

2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 705086

Entity Name: FAITH EVANGELICAL LUTHERAN CHURCH OF DELAND INC.**Current Principal Place of Business:**509 E PENNSYLVANIA AVE.
DELAND, FL 32724**Current Mailing Address:**509 E PENNSYLVANIA AVE.
DELAND, FL 32724**FEI Number:** 59-0914204**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**MALLETT, DORA LYNN
509 E PENNSYLVANIA AVE.
DELAND, FL 32724 US*The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.***SIGNATURE:** DORA L. MALLETT

01/30/2018

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title TREASURER
Name MALLETT, DORA L
Address 509 E PENNSYLVANIA AVE.
City-State-Zip: DELAND FL 32724

Title PRESIDENT
Name BOUCHARD, SCOTT
Address 509 E PENNSYLVANIA AVE.
City-State-Zip: DELAND FL 32724

Title VP
Name MORRIS, DEBRA
Address 509 E PENNSYLVANIA AVE.
City-State-Zip: DELAND FL 32724

Title FINANCIAL SECRETARY
Name BOYER, DEBBY
Address 509 E PENNSYLVANIA AVE.
City-State-Zip: DELAND FL 32724

Title SECRETARY
Name MARTIN, HELEN
Address 509 E PENNSYLVANIA AVENUE
City-State-Zip: DELAND FL 32724

Title OFFICE MANAGER
Name CORNWELL, AMY
Address 509 E PENNSYLVANIA AVE.
City-State-Zip: DELAND FL 32724

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

SIGNATURE: DORA L. MALLETT

TREASURER

01/30/2018

Electronic Signature of Signing Officer/Director Detail

Date