

**2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 711832

**FILED**  
**Mar 15, 2023**  
**Secretary of State**  
**5541171697CC**

**Entity Name:** ST. LUKE'S EVANGELICAL LUTHERAN CHURCH, INC., OF SLAVIA, FLORIDA

**Current Principal Place of Business:**

2021 W. STATE ROAD 426  
OVIEDO, FL 32765

**Current Mailing Address:**

2021 W. STATE ROAD 426  
OVIEDO, FL 32765 US

**FEI Number:** 59-1153406

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

PRUSAK, LISA  
2021 W ST RD 426  
OVIEDO, FL 32765 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:** LISA PRUSAK

03/15/2023

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title           PRESIDENT  
Name           TAYLOR, DOUG  
Address        2021 W ST RD 426  
City-State-Zip: OVIEDO FL 32765

Title           DIRECTOR  
Name           BLANK, DAVID  
Address        2021 W. STATE ROAD 426  
City-State-Zip: OVIEDO FL 32765

Title           VP  
Name           BRUMBACK, PAULA  
Address        2021 W. STATE ROAD 426  
City-State-Zip: OVIEDO FL 32765

Title           SECRETARY  
Name           SCHULTZ, JEFF  
Address        2021 W SR 426  
City-State-Zip: OVIEDO FL 32765

Title           DIRECTOR  
Name           SHAFFER, STEPHEN  
Address        2021 W SR 426  
City-State-Zip: OVIEDO FL 32765

Title           TREASURER  
Name           DOYLE II, WILLIAM OWENS BRYANT  
Address        2021 W SR 426  
City-State-Zip: OVIEDO FL 32765

Title           DIRECTOR  
Name           MCALLAN, GEORGE  
Address        2021 W SR 426  
City-State-Zip: OVIEDO FL 32765

Title           DIRECTOR  
Name           CLAPSADDLE, KAREN  
Address        2021 W SR 426  
City-State-Zip: OVIEDO FL 32765

**Continues on page 2**

*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:** WILLIAM OWENS BRYANT DOYLE II

TREASURER

03/15/2023

Electronic Signature of Signing Officer/Director Detail

Date

**Officer/Director Detail Continued :**

Title            DIRECTOR  
Name            BEGEY, MICHAEL  
Address        2021 W SR 426  
City-State-Zip: OVIEDO FL 32765