

2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 734105

FILED
Jan 22, 2017
Secretary of State
CC2839182449

Entity Name: UNIVERSITY EVANGELICAL LUTHERAN CHURCH,
INCORPORATED

Current Principal Place of Business:

1826 WEST UNIVERSITY AVENUE
GAINESVILLE, FL 32603

Current Mailing Address:

1826 WEST UNIVERSITY AVENUE
GAINESVILLE, FL 32603

FEI Number: 59-1091078

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

UNIVERSITY EVANGELICAL LUTHERAN CHURCH, INC.
1826 WEST UNIVERSITY AVENUE
GAINESVILLE, FL 32603 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: RONALD M. GORDON

01/22/2017

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PRESIDENT
Name NORFORD, KRISTINA E
Address 125 SE 16TH AVE
 L102
City-State-Zip: GAINESVILLE FL 32601

Title VICE-PRESIDENT
Name CHAMBERLIN, WILLIAM DR.
Address 2632 NW 28TH PLACE
City-State-Zip: GAINESVILLE FL 32605

Title TREASURER
Name YALE, JAMES L.
Address 8520 SW 99TH PLACE
City-State-Zip: GAINESVILLE FL 32608

Title SECRETARY
Name JAHN, STEPHANI
Address 1627 NE 40TH PLACE
City-State-Zip: GAINESVILLE FL 32609

Title DIRECTOR
Name DAY, DONNA
Address 6602 SW 78TH ST
City-State-Zip: GAINESVILLE FL 32608

Title DIRECTOR
Name VALA, VIBEKE
Address 3432 NW 11TH AVE
City-State-Zip: GAINESVILLE FL 32605

Title DIRECTOR
Name KLEIN, JACKIE
Address 1918 NW 43TH AVE
City-State-Zip: GAINESVILLE FL 32605

Title DIRECTOR
Name GORDON, RONALD M DR.
Address P. O. BOX 14494
City-State-Zip: GAINESVILLE FL 32614

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: JAMES YALE

TREASURER

01/22/2017

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name JANKE, JANET
Address 5200 SW 25TH BLVD
 #1220
City-State-Zip: GAINESVILLE FL 32608