

2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 734904

Entity Name: THE CHURCH OF THE INCARNATION (LUTHERAN) OF SILVER SPRINGS SHORES, OCALA, FLORIDA, INC.**FILED**
Feb 13, 2013
Secretary of State
CC6171219526**Current Principal Place of Business:**9300 SPRING RD
OCALA, FL 34472**Current Mailing Address:**9300 SPRING RD
OCALA, FL 34472**FEI Number: 59-2925821****Certificate of Status Desired: Yes****Name and Address of Current Registered Agent:**LASALLE, STEVE
32 SPRING LOOP
OCALA, FL 34472 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:**_____
Electronic Signature of Registered Agent_____
Date**Officer/Director Detail :**

Title	PRESIDENT
Name	LASALLE, STEVE
Address	32 SPRING LOOP
City-State-Zip:	OCALA FL 34472

Title	VP
Name	BOWERS, MARGARET
Address	11 BAHIA LOOP
City-State-Zip:	OCALA FL 34472-2708

Title	SECRETARY
Name	JACKSON, DOROTHY
Address	9350 BAHIA RD.
City-State-Zip:	OCALA FL 34472-2971

Title	MEMBER
Name	SINSMEISTER, DOROTHY
Address	PO BOX 1509
City-State-Zip:	OCKLAWAHA FL 32183-1509

Title	MEMBER
Name	STRONG, LOIS
Address	12511 SE 120 ST.
City-State-Zip:	OCKLAWAHA FL 32179-4837

Title	TREASURER
Name	PARNHAM, FLORENCE E
Address	11 BAHIA LOOP
City-State-Zip:	OCALA FL 34472

Title	MEMBER
Name	CARROLL, LORRAINE
Address	3271 SE 56TH TER.
City-State-Zip:	OCALA FL 34480

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: FLORENCE E PARNHAM**TREASURER****02/13/2013**_____
Electronic Signature of Signing Officer/Director Detail_____
Date