# 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: PIERCE J. GUARD, JR.

DIRECTOR BEARD, DANIEL

City-State-Zip: LAKELAND FL 33803

211 EASTON DRIVE

Electronic Signature of Signing Officer/Director Detail

## DOCUMENT# N01055

#### Entity Name: FAITH LUTHERAN CHURCH OF LAKELAND, INC.

2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

#### Current Principal Place of Business:

SIGNATURE: PIERCE J. GUARD, JR.

211 EASTON DRIVE LAKELAND, FL 33803

#### **Current Mailing Address:**

211 EASTON DRIVE LAKELAND, FL 33803

#### FEI Number: 59-1821755

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

GUARD, JR., PIERCE J. 2511 ORLEANS AVENUE LAKELAND, FL 33803 US

Title

Name

Address

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.

|                           | orona cronce    | . THEROE 0. 00/110, 011.                 |                 |                     | 01/10/2021 |
|---------------------------|-----------------|--|-----------------|---------------------|------------|
|                           |                 | Electronic Signature of Registered Agent |                 |                     | Date       |
| Officer/Director Detail : |                 |  |                 |                     |            |
|                           | Title           | TD                                       | Title           | SD                  |            |
|                           | Name            | GUARD, PIERCE J JR.                      | Name            | BOWMAN, NATALIE     |            |
|                           | Address         | 2511 ORLEANS AVENUE                      | Address         | 3016 PINEWAY AVENUE |            |
|                           | City-State-Zip: | LAKELAND FL 33803                        | City-State-Zip: | LAKELAND FL 33803   |            |
|                           | Title           | VD                                       | Title           | PRESIDENT, DIRECTOR |            |
|                           | Name            | MORRIS, ANN                              | Name            | SHEPHERD, ROBERT    |            |
|                           | Address         | 4220 WINDCHIME LANE                      | Address         | 1546 DOGWOOD DRIVE  |            |
|                           | City-State-Zip: | LAKELAND FL 33811                        | City-State-Zip: | LAKELAND FL 33801   |            |
|                           | Title           | DIRECTOR                                 | Title           | DIRECTOR            |            |
|                           | Name            | LEWIS, BETH                              | Name            | EADES, KATHRYN      |            |
|                           | Address         | 211 EASTON DRIVE                         | Address         | 3314 SONGBIRD LANE  |            |
|                           | City-State-Zip: | LAKELAND FL 33803                        | City-State-Zip: | LAKELAND FL 33811   |            |
|                           |                 |  |                 |                     |            |

I. GUARD, JR. TREASURER/DIRECTOR

Date

01/19/2021

### FILED Jan 19, 2021 Secretary of State 6561821210CC

01/19/2021

Certificate of Status Desired: No