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NONPROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 701097

1. Corporation Name

GRACE LUTHERN CHURCH OF CLEARWATER, INC., CLEARWATER, FLORIDA

Principal Place of Business

1812 N.HIGHLAND AVE.
CLEARWATER FL 34615

Mailing Address

1812 N.HIGHLAND AVE.
CLEARWATER FL 34615



2. Principal Place of Business

21 Suite, Apt. #, etc.

23 City & State

24 Zip 33755 25 Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip 33755 29 Country

3. Date Incorporated or Qualified

06/18/1960

4. FEI Number

59-0998928

Applied For
Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Election Campaign Financing

Trust Fund Contribution

\$5.00 May Be
Added to Fees

9. Name and Address of Current Registered Agent

WHITENER, C. PHILLIP
1812 N HIGHLAND AVE
CLEARWATER FL 34615

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

33755

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE VD DELETE

NAME NETTIN, DALE
STREET ADDRESS 3439 ROLLING TRAIL
CITY-ST-ZIP PALM HARBOR FL

TITLE PD DELETE

NAME TIEMAN, LAWRENCE
STREET ADDRESS 1812 N HIGHLAND AVE
CITY-ST-ZIP CLEARWATER FL

TITLE SD DELETE

NAME BENSON, NANCCY
STREET ADDRESS 430 WILDWOOD WAY
CITY-ST-ZIP CLEARWATER FL

TITLE D DELETE

NAME MARIE HANSEN
STREET ADDRESS 1812 N. HIGHLAND AVE.
CITY-ST-ZIP CLEARWATER FL

TITLE DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE SD Change Addition

1.2 NAME Patricia Powell
1.3 STREET ADDRESS 433 Marjon Ave.
1.4 CITY-ST-ZIP Dunedin, FL 34698

2.1 TITLE Change Addition

2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

3.1 TITLE VD Change Addition

3.2 NAME Benson, Nancy
3.3 STREET ADDRESS 430 Wildwood Way
3.4 CITY-ST-ZIP Clearwater, FL 33756

4.1 TITLE Change Addition

4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE Change Addition

5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE Change Addition

6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Nancy Benson
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Nancy Benson

1-5-99

Date

727-446-5026

Daytime Phone #

CR2F037-11/98