FILE NOW: FILING FEE AFTER MAY 1 IS $155.00

CORPORATION ANNUAL REPORT **1995**

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 FEB 20 AM 11:27

DOCUMENT # 701739 (5)

1. Corporation Name

ASCENSION LUTHERAN CHURCH OF CASSELBERRY, INC.

Principal Place of Business	Mailing Address
351 ASCENSION DRIVE CASSELBERRY FL 32707-3801	351 ASCENSION DRIVE CASSELBERRY FL 32707-3801

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 12/01/1960
3a. Date of Last Report: 02/03/1994
4. FEI Number: 59-6140406 — 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
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status ☒ — $68.75 Supplemental Fee Not Required
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☐ No

2. Principal Place of Business	2a. Mailing Address
21	26
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23	City & State 28
Zip 24 / Country 25	Zip 29 / Country 30

9. Name and Address of Current Registered Agent

WATKINS, LELAND
520 STEPHANIE CT.
LAKE MARY FL 32746

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

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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 607.0505, Florida Statutes.

SIGNATURE: [signature] Leland Watkins 1/15/95
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered agent's signature required when filing.) Date

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD	1.1 TITLE	☐ Change ☐ Addition
NAME	WATKINS, LELAND	1.2 NAME	
STREET ADDRESS	520 STEPHANIE CT.	1.3 STREET ADDRESS	
CITY-ST-ZIP	LAKE MARY FL	1.4 CITY-ST-ZIP	
TITLE	VD	2.1 TITLE	VICE PRESIDENT ☒ Change ☐ Addition
NAME	SUUMERSGILL, BRENT	2.2 NAME	ROHLOFF, GORDON
STREET ADDRESS	1604 SANDPIPER TRAIL E.	2.3 STREET ADDRESS	705 ANDOVER CIRCLE
CITY-ST-ZIP	CASSELBERRY FL 32707	2.4 CITY-ST-ZIP	WINTER SPRINGS, FL 32708-6113
TITLE	SD	3.1 TITLE	☐ Change ☐ Addition
NAME	STEIGR, BEVERLY	3.2 NAME	
STREET ADDRESS	1651 OAKHURST AVE.	3.3 STREET ADDRESS	
CITY-ST-ZIP	WINTER PARK FL	3.4 CITY-ST-ZIP	
TITLE	TD	4.1 TITLE	☒ Change ☐ Addition
NAME	OMBRES, WILLIAM	4.2 NAME	TREASURER
STREET ADDRESS	104 BUCKSKIN WAY	4.3 STREET ADDRESS	ROBERT MULLER
CITY-ST-ZIP	WINTER SPRINGS FL	4.4 CITY-ST-ZIP	113 ROCKINGHAM CT.
TITLE		5.1 TITLE	LONGWOOD, FL 32779 ☐ Change ☐ Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	☐ Change ☐ Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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.

SIGNATURE: [signature] LELAND WATKINS 1/15/95
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

0030701