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**CORPORATION
ANNUAL REPORT
1995**



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

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # 702907 (7)

1. Corporation Name

**CHRIST THE KING EVANGELICAL LUTHERAN CHURCH OF T
EQUESTA, INC.**

Principal Place of Business

Mailing Address

46 WILLOW ROAD
TEQUESTA FL 33469-9647

46 WILLOW ROAD
TEQUESTA FL 33469-9647

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

09/18/1961

3a. Date of Last Report

03/17/1994

4. FEI Number

59-1362911

Applied For

Not Applicable

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

28 Zip

24 Country

29 Country

5. Certificate of Status Desired

☐ \$8.75 Additional Fee Required

6. Election Campaign Financing

☐ \$5.00 May Be Added to Fees

Trust Fund Contribution

☐

7. Nonprofit with IRS 501(c)(3)

☒ \$68.75 Supplemental Fee Not Required

Tax Exempt Status

☒

8. This corporation has liability for intangible tax under S. 199.032,

Florida Statutes

☐ Yes

☒ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

SINN, REV. THOMAS, F
8722 SE SANDCASTLE CIRCLE
HOBE SOUND FL 33455

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, typed or printed name of registered agent and fee if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE PD

1.1 TITLE

☐ Change ☐ Addition

NAME KRABEC, JANET L.

1.2 NAME

STREET ADDRESS 5754 RIVER CLUB CIR.

1.3 STREET ADDRESS

CITY - ST - ZIP JUPITER FL

1.4 CITY - ST - ZIP

TITLE VD

2.1 TITLE

☐ Change ☐ Addition

NAME BRYAN, JOHN

2.2 NAME

STREET ADDRESS 18777 SE RIVER RIDGE RD.

2.3 STREET ADDRESS

CITY - ST - ZIP TEQUESTA FL

2.4 CITY - ST - ZIP

TITLE SD

3.1 TITLE

☐ Change ☐ Addition

NAME SCHNEIDER, RICHARD

3.2 NAME

STREET ADDRESS 129 SIMS CREEK LANE

3.3 STREET ADDRESS

CITY - ST - ZIP JUPITER FL 33458

3.4 CITY - ST - ZIP

TITLE T

4.1 TITLE

☐ Change ☐ Addition

NAME GREEN, JOHN

4.2 NAME

STREET ADDRESS 846 COCUS PLUMOSA

4.3 STREET ADDRESS

CITY - ST - ZIP JUPITER FL

4.4 CITY - ST - ZIP

TITLE

5.1 TITLE

☐ 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 hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(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 817, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Janet L. Krabec Janet L. Krabec

2/11/95

407-286-8762

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Telephone Number