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Mar 04 1997 8:00am  
Secretary of StateNONPROFIT  
CORPORATION  
ANNUAL REPORT  
1997FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

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 33469-964746 WILLOW ROAD  
TEQUESTA FL 33469-26473. Date Incorporated or Qualified  
09/18/19613a. Date of Last Report  
07/23/19964. FEI Number  
59-1362911Applied For  
Not Applicable5. Certificate of Status Desired ☐ \$8.75 Additional  
Fee Required6. Election Campaign Financing  
Trust Fund Contribution ☐ \$5.00 May Be  
Added to Fees8. This corporation has liability for intangible tax under s. 199.032,  
Florida Statutes ☐ Yes ☒ No

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City &amp; State

27 City &amp; State

23 Zip Country

28 Zip Country

24 25 29 30 33469-9647

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

MILLER, REV. WILLIAM B  
46 WILLOW ROAD  
TEQUESTA FL 33469

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 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

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE PD ☒ DELETE  
NAME EVANS, JAMES  
STREET ADDRESS 188 BENT ARROW DRIVE  
CITY - ST - ZIP JUPITER FL1.1 TITLE PD ☒ Change ☐ Addition  
1.2 NAME RHODES, DAVID  
1.3 STREET ADDRESS 106 Pennock Trace Dr.  
1.4 CITY - ST - ZIP Jupiter, FL 33458TITLE VD ☒ DELETE  
NAME RHODES, DAVID  
STREET ADDRESS 109 ARROWHEAD CIRCLE  
CITY - ST - ZIP JUPITER FL2.1 TITLE VD ☒ Change ☐ Addition  
2.2 NAME CARROLL, JONATHAN  
2.3 STREET ADDRESS 103 Golfview Dr.  
2.4 CITY - ST - ZIP Tequesta, FL 33469TITLE SD ☒ DELETE  
NAME BRYAN, JOHN L.  
STREET ADDRESS 18777 SE RIVER RIDGE ROAD  
CITY - ST - ZIP TEQUESTA FL3.1 TITLE SD ☒ Change ☐ Addition  
3.2 NAME HANSON, NANCY  
3.3 STREET ADDRESS 6555 - H Chasewood North  
3.4 CITY - ST - ZIP Jupiter, FL 33458TITLE T ☒ DELETE  
NAME GREEN, JOHN  
STREET ADDRESS 846 COCUS PLUMOSA  
CITY - ST - ZIP JUPITER FL4.1 TITLE T ☒ Change ☐ Addition  
4.2 NAME WILLE, WAYNE  
4.3 STREET ADDRESS 22 River Drive  
4.4 CITY - ST - ZIP Tequesta, FL 33469TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP5.1 TITLE ☐ Change ☐ Addition  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY - ST - ZIPTITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP6.1 TITLE ☐ Change ☐ Addition  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY - ST - ZIP

14. I do 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.

SIGNATURE:

Signature: typed or printed name of signing officer or director  
REQUIRED

02-17-97

561-746-7085

Date

Daytime Phone # 004321

CR2E037 (9/96)