

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 19, 2008 8:00 am
Secretary of State

03-19-2008 90014 031 ****61.25

DOCUMENT # 702907

1. Entity Name
**CHRIST THE KING EVANGELICAL LUTHERAN CHURCH
OF TEQUESTA, INC.**



Principal Place of Business: 46 WILLOW ROAD
TEQUESTA, FL 33469-9647

Mailing Address: 46 WILLOW ROAD
TEQUESTA, FL 33469-9647 US

40048588



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

01102008 Chg-NP CR2E037 (12/06)

4. FEI Number
59-1362911

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

JOHNSON, LOUISE
8228 SE CREFT CIRCLE J-1
HOBE SOUND, FL 33455

7. Name and Address of New Registered Agent

Name

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

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$61.25
Due by May 1, 2008**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

**Make check payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE: TD
NAME: JOHNSON, LOUISE
STREET ADDRESS: 8228 SE CROFT CIRCLE J-1
CITY-ST-ZIP: HOBE SOUND, FL 33458 ☐ Delete

TITLE: PD
NAME: RIDDLE, BRYAN
STREET ADDRESS: 18337 OAK LEAF DR.
CITY-ST-ZIP: JUPITER, FL 33458 ☒ Delete

TITLE: VD
NAME: MEYBURG, BEN
STREET ADDRESS: 110 PALAMINO DR
CITY-ST-ZIP: JUPITER, FL 33458 ☒ Delete

TITLE: SD
NAME: CULLER, PAUL
STREET ADDRESS: 346 FAIRWAY NORTH
CITY-ST-ZIP: TEQUESTA, FL 33469 ☐ Delete

TITLE: ☐ Delete
NAME: ☐ Delete
STREET ADDRESS: ☐ Delete
CITY-ST-ZIP: ☐ Delete

TITLE: ☐ Delete
NAME: ☐ Delete
STREET ADDRESS: ☐ Delete
CITY-ST-ZIP: ☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE: ☐ Change ☐ Addition
NAME: ☐ Change ☐ Addition
STREET ADDRESS: ☐ Change ☐ Addition
CITY-ST-ZIP: ☐ Change ☐ Addition

TITLE: ☐ Change ☐ Addition
NAME: ☐ Change ☐ Addition
STREET ADDRESS: ☐ Change ☐ Addition
CITY-ST-ZIP: ☐ Change ☐ Addition

TITLE: ☐ Change ☒ Addition
NAME: Pres. Mayburg, Ben
STREET ADDRESS: 110 Palamino Dr
CITY-ST-ZIP: Jupiter, FL 33458

TITLE: ☐ Change ☒ Addition
NAME: VD Miller, Ise
STREET ADDRESS: 48 Ridgewood Cir.
CITY-ST-ZIP: Tequesta, FL 33469

TITLE: ☐ Change ☐ Addition
NAME: ☐ Change ☐ Addition
STREET ADDRESS: ☐ Change ☐ Addition
CITY-ST-ZIP: ☐ Change ☐ Addition

TITLE: ☐ Change ☐ Addition
NAME: ☐ Change ☐ Addition
STREET ADDRESS: ☐ Change ☐ Addition
CITY-ST-ZIP: ☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Louise Johnson Treasurer
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/14/08
Date

(561) 746-2085
Daytime Phone #

Louise Johnson - Treas.