2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # 704350

1. Entity Name
REDEEMER LUTHERAN CHURCH OF MANATEE COUNTY, FLO RIDA, INC.

Principal Place of Business	Mailing Address
6311 THIRD AVENUE WEST BRADENTON, FL 34209	6311 THIRD AVENUE WEST BRADENTON, FL 34209

DO NOT WRITE IN THIS SPACE

03072007 No Chg-NP   CR2E037 (4/06)

4. FEI Number		Applied For
59-1301489		Not Applicable

5. Certificate of Status Desired ☐   **$8.75** Additional Fee Required

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6. Name and Address of Current Registered Agent

KEYSER, ALBERT W REV.
6311 3RD AVE., WEST
BRADENTON, FL 34209

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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, 2007**	**9.** Election Campaign Financing Trust Fund Contribution. ☐	**$5.00** May Be Added to Fees	

10. OFFICERS AND DIRECTORS

TITLE	P
NAME	HORISZNY, BILL
STREET ADDRESS	1208 59TH STREET WEST
CITY-ST-ZIP	BRADENTON, FL 34209
TITLE	VP
NAME	TEWY, BAILEY
STREET ADDRESS	5202 17TH AVE WEST
CITY-ST-ZIP	BRADENTON, FL 34209
TITLE	TSD
NAME	HUFFMAN, BARBARA
STREET ADDRESS	6104 D EVERGREEN CIRCLE
CITY-ST-ZIP	BRADENTON, FL 34209
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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04/10/07-80025-017 61.25

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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: _____   03/16/07   9417925990

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR   Date   Daytime Phone #