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Mar 02 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **705984** (3)

1. Corporation Name

LUTHERAN CHURCH OF THE REDEEMER OF MELBOURNE, IN C.

Principal Place of Business MELBOURNE INC 12 EAST AVENUE "A" MELBOURNE FL 32901-8391	Mailing Address MELBOURNE INC 12 EAST AVENUE "A" MELBOURNE FL 32901-8391
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3. Date Incorporated or Qualified

08/02/1963

4. FEI Number

59-6045470

Applied For

Not Applicable

2. Principal Place of Business

21
Suite, Apt. #, etc.

22
City & State

23
Zip

24
Country

2a. Mailing Address

25
Suite, Apt. #, etc.

27
City & State

28
Zip

29
Country

6. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Election Campaign Financing
Trust Fund Contribution ☐

**\$5.00 May Be
Added to Fees**

7. Is this nonprofit corporation a homeowners association?

☐ Yes ☐ No

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30. ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

**REITER, REV., DONALD
3710 TROUT ISLAND PLACE
MELBOURNE FL 32934**

10. Name and Address of New Registered Agent

81 Name

Candoyce L. Koshinski

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

2705 Candy Lane

83

84 City

Malabar

FL

85 Zip Code

32950

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

Candoyce L. Koshinski, Treasurer

Candoyce L. Koshinski

2-23-98

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE **PT** ☒ DELETE

NAME **KOSHINSKI**
STREET ADDRESS **5485 OSCEOLA DRIVE**
CITY-ST-ZIP **ST CLOUD FL**

TITLE **ST** ☒ DELETE

NAME **KOSHINSKI, MARILYN**
STREET ADDRESS **5485 OSCEOLA DR**
CITY-ST-ZIP **ST CLOUD FL**

TITLE **VT** ☒ DELETE

NAME **FRANK OELSCHLAGER**
STREET ADDRESS **2590 CHAPPARAL DR**
CITY-ST-ZIP **MELBOURNE FL**

TITLE **TT** ☐ DELETE

NAME **KOSHINSKI, CANDYCE L**
STREET ADDRESS **2705 CANDY LANE**
CITY-ST-ZIP **MALABAR FL**

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

PT

Frank Oelschlager

2590 Chapparral Drive

Melbourne, FL 32934

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

ST

Jo Hennessy

3A Venetian Way

Indian Harbor Beach, FL 32937-5321

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

VT

Loretta Isenberg-Hand

1167 Sanddune Lane #102

Melbourne, FL 32935

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

☐ Change ☐ Addition

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

☐ Change ☐ Addition

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

☐ Change ☐ Addition

14. I 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:

Candoyce L. Koshinski

Candoyce L. Koshinski

12-23-98

(407) 723-4152

CR2E037 (1097)