

# 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 707647

FILED  
Aug 12, 2005  
Secretary of State

**Entity Name:** MESSIAH LUTHERAN CHURCH OF PANAMA CITY, INC.

**Current Principal Place of Business:**

3701 W, HWY 390  
PANAMA CITY, FL 32405 US

**New Principal Place of Business:**

**Current Mailing Address:**

3701 W, HWY 390  
PANAMA CITY, FL 32405 US

**New Mailing Address:**

**FEI Number:** 59-1361675 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

**Name and Address of Current Registered Agent:**

FOWLER, TAMMY  
2805 E 4TH STREET  
PANAMA CITY, FL 32401 US

**Name and Address of New Registered Agent:**

RENNEKE, FERNANDO J TREASUR  
2120 SQUIRREL RUN  
LYNN HAVEN, FL 32444 US

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.

SIGNATURE: FERNANDO J. RENNEKE

08/12/2005

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: SD ( ) Delete  
Name: COLLINS, DEBRA  
Address: 403 CAROLINA AVE.  
City-St-Zip: LYNN HAVEN, FL 32444

Title: D ( ) Delete  
Name: SUMMERS, KIRSTEN  
Address: 603 MALLORY DRIVE  
City-St-Zip: PANAMA CITY, FL 32405

Title: D ( ) Delete  
Name: WOLFF, RONALD  
Address: 2839 LONGLEAF ROAD  
City-St-Zip: PANAMA CITY, FL 32405

Title: TD ( ) Delete  
Name: FOWLER, TAMMY  
Address: 2805 E 4TH STREET  
City-St-Zip: PANAMA CITY, FL 32401

Title: PD ( ) Delete  
Name: MORTENSON, DALE  
Address: 210 MONTANA AVE  
City-St-Zip: LYNN HAVEN, FL 32444

Title: D (X) Delete  
Name: GILLAND, MARK  
Address: 4010 NAPOLI  
City-St-Zip: PANAMA CITY, FL 32405

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: SD (X) Change ( ) Addition  
Name: ALDEA, CATHERINE  
Address: 204 BUNKERS COVE ROAD  
City-St-Zip: PANAMA CITY, FL 32401

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: D (X) Change ( ) Addition  
Name: MOUNT, PHILLIP  
Address: 110C ALABAMA AVENUE  
City-St-Zip: LYNN HAVEN, FL 32444

Title: TD (X) Change ( ) Addition  
Name: RENNEKE, FERNANDO J  
Address: 2120 SQUIRREL RUN  
City-St-Zip: LYNN HAVEN, FL 32444

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: FERNANDO J. RENNEKE

SD

08/12/2005

Electronic Signature of Signing Officer or Director

Date