NONPROFIT __ CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

1999 **DOCUMENT # 710936**

1. Corporation Name

ST. JOHN LUTHERAN CHURCH, INC.

FILED Feb 25, 1999 8:00 am § Secretary of State

02-25-1999 90081 045 ****61.25

Principal Place of Business Mailing Address										
10495 SUNSET HARBOR RD. 10495 SUNSET HARBOR RD.					}	1 (3 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	IN KAKAN ILKIN DIIK NINKI (ARIO BIRIO BIRIO DA	BH DIBK IRR	
SUMMERFIELD		SUMMERFIELD FL 34491								
US		US					<u> </u>	ABU DIDI DABU B	FAL DIQUE LEGA	
2. Principal Pl	ace of Business	2a. Mailing Address			3.	Date Incorporated or	Qualifed			
21		26			ŀ	05/31/1966				
Suite, Apt. #, etc.		Suite, Apt. #, etc.			4.	FEI Number		Ap	plied For	
		27			l	59-2037536		No	t Applicable	
City & State		City & State			5	5. Certificate of Status Desired \$8.75 Additional				
23		28				- Certificate of Clarico D		Fee Re	quired	
Žip	Country	Zip	Country	,	6.	Election Campaign Fi	nancing	\$5.00	May Be	
24	25	29 30				Trust Fund Contribution	on «	 	o Fees	
	9. Name and Address of Current	Registered Agent			10.	Name and Address				
			81	Name		6 生物表示。	The second second	A Section		
PIERCE, PAULA				82 Street Address (P.O. Box Number is Not Acceptable)						
-	94TH AVE		62 Street AC							
	FIELD FL 34491		83							
COMME	ICED 1 C OTTO 1		_					0.0 7:- (Pada .	
•			84	City			FI	85 Zip (-00e	
11. Pursuant t	to the provisions of Sections 617.0502	and 617.1508, Florida Statutes, 1	he abov	e-named	corporation	submits this statemer	nt for the purpose o	f changing its	registered	
office or re	egistered agent, or both, in the State on familiar with, and accept the obligation	f Florida. Such change was autho	rized hv	the corpo	oration's bo	pard of directors. I here	by accept the appo	intment as re	gistered	
agent. i ar	m ramıllar witti, aliq accept the obligati	ons of, Section 617.0303, Florida	Statutes	٠.						
SIGNATURE	Signature, typed or printed name of registered agent	and title if applicable. (NOTE: Reg	istered Age	nt signature re	nertw beniupe	einstating)	DATE			
12.	OFFICERS AND		13.		,	ADDITIONS/CHANGE	TO OFFICERS A	ND DIRECTO	RS IN 12	
TITLE	P	⊠ DELETE	1.1 TITLE		ρ			Change	☐ Addition	
NAME	DONALD BRETZ	ŕ	1.2 NAME		DAR	HORAK				
STREET ADDRESS	17648 SE 107TH CT		1.3 STREE	TADORESS	5641	S PIN ARE	R			
	SUMMERFIELD, FL 00000 3449		1.4 CITY-S		LAD	Y LANG, FL	32159			
CITY-ST-ZIP TITLE	TD	□ DELETE	2.1 TITLE	1-21	V	 		Change	☐ Addition	
	PIERCE, PAULA		22 NAME	-		O BLAKE				
NAME	14301 SE 94TH ST			TADDRESS	1618	E. SWARTZ	BLVD			
STREET ADDRESS					10.0	Y LAME, FL	32159			
CITY-ST-ZIP			2.4 CITY-1	ST-ZiP	LNGU	1 48172	00101	[2] Change	☐ Addition	
TITLE	D UNA OTANZON	☐ DELETE	3.1 TITLE		T			K Z Sildinge		
NAME	JIM STAYTON	<u> </u>	3.2 NAME							
STREET ADDRESS	9591 162ND PL RD		3.3 STREE	TADDRESS						
CiTY-ST-ZIP	SUMMERFIELD FL 34491		3.4. CITY-	ST-ZIP				Chanas	[] Addition	
TITLE	VP	⊠ DELETE	4.1 TITLE	1				Change :	Addition	
NAME	BOB HORAK		4. 2 NAME							
STREET ADDRESS	5640 SPINAKER		4.3 STREE	T ADDRESS						
CITY-ST-ZIP	LADY LK FL 32159		4.4 CITY-S	T-ZIP			_			
TITLE	D	Ø DELETE	5.1 TITLE					Change	Addition	
NAME	FRED BLAKE		5.2 NAME							
STREET ADDRESS	1618 E SWARTZ BLVD		5.3 STREE	TADORESS						
CITY-ST-ZIP	LADY LK FL 32159		5.4 CITY-S	T-ZIP						
TITLE	D	☐ DELETE	6.1 TITLE					Change	Addition	
NAME	ROBERT STODOLA		6.2 NAME							
STREET ADDRESS	310 DELMAR DR		6.3 STREE	T ADDRESS						
CITY-ST-ZIP	LADY LK FL 32159		6.4 CITY-S	ST-ZIP						
GIT (*31*ZIF										

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, with all other like empowered.

SIGNATURE:



350-288-2041