2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED Mar 02, 2007 8:00 am Secretary of State

	ANNUAL REPORT	
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1. Entity Nam	JMENT #710936 in Lutheran Church, Inc.				03-02-2007 90020 018 ****61.25					
Principal Plac 10495 SUNS SUMMERFIEL	ET HARBOR	RD.	1049	Mailing Address 10495 SUNSET HARBOR RD SUMMERFIELD, FL 34491 US			∛ Λήθεροςς			
2. Principal P	lace of Busin	less - No P.O. Box #	3. Maili	ng Address			•			
Suite, Apt.	#, etc.		Suit	Suite, Apt. #, etc.			02132007 Chg-NP CR2E037 (12/06)			
City & Stat	ө		City	City & State				4. FEI Number Applied For 59-3285000 Not Applicable		
Zip		Country	Zíp		Cou	ntry		5. Certificate of Status Desired Status Desired Fee Required		
	6. Name	and Address of Curren	t Registered	d Agent				7. Name and Address of New Registered Agent		
QUALHEIN	A KENNE	TH D				Name	SER	2 A REMINGER		
17734 SE										
SUMMER						78/	<u>'5 (</u>	(P.O. Box Number is Not Acceptable)		
	,					76	را م	FILAGES		
						City	~ v ,	17.0		
						,		FL 32/62		
			or the purpo	ise of changing its	registere	ed office or r	register	red agent, or both, in the State of Florida. I am familiar with, and accept		
the obligat	ions of regist	ered agent								
			//					2-26-07		
SIGNATURE .		Jan Cr.	pre	ruge	<u> </u>					
	Signature, typed	or printed name of registered ager	it and title if appli	icable. O (NOTE	: Registare	d Agent signature	e required	d when reinstating) DATE		
	_	e is \$61.25 lay 1, 2007		9. Election Can Trust Fund C				\$5.00 May Be Added to Fees Make check payable to Florida Department of State		
10.		OFFICERS AND D	IRECTORS		11.			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE	PD	OT TOLITO TITO D	INEO TOTIO	△ Delete	TITLE			S10 FNT DChange ☐ Addition		
NAME	MILLER,	IFRE		Delete	NAM		m	LEAN, Dick		
STREET ADDRESS	1			ET ADDRESS	777	10. Box 225				
CITY-ST-ZIP	ľ	W, FL 34420			CITY	-ST-ZIP				
TITLE	VD	·		Delete	TITLE	:	- VV 5	E/RSDALE FL 32/95 E PRESIDENT Change Addition		
NAME	MCLEAN,	DICK		Delete	NAM			ERT KUNSTLER		
STREET ADDRESS	PO BOX 2				1	ET ADDRESS	22	367 CR 546 NORTH		
CITY - ST - ZIP	;	ALE, FL 32195				-ST-ZIP	F	BushNell FL 33513		
TITLE	TD	-		Delete	TITLE	:	To.	EASURER Addition		
NAME	STAYTON	I, JAMES M		/ 3 00.0.0	NAM	_	Roll	- a Manualta		
STREET ADDRESS	9591 SE 1	162 PL			STRE	ET ADDRESS	701	CLEVALTA HIBERNIA		
CITY-ST-ZIP	SUMMER	FIELD, FL 34491			CITY	-ST-ZIP	The	VillALES 71 32/62		
TITLE	\$D			Delete Delete	TITLE		52	No. 1/ALES 7/ 37/62 Change Maddition INCLUDE TO SCHOOL GRESS BURRALL GRESSALE 7/ 32,85		
NAME	DAMKOH	LER, KAREN		•	NAM	E	AN	INA Bores Burrace		
STREET ADDRESS	2009 RIO					ET ADDRESS	133	390 SUNSET HARBON KD		
CITY-ST-ZIP	LADY LAP	KE, FL 32159			CITY	-ST-ZIP	WE.	FIRSDALE 71 32185		
TITLE				Delete	TITLE			☐ Change ☐ Addition		
NAME					NAM					
STREET ADDRESS						ET ADORESS				
CITY-ST-ZIP						-ST-ZIP				
TITLE				☐ Delete	TITLE			☐ Change ☐ Addition		
NAME					NAM					
STREET ADDRESS	1					ET ADDRESS				
CITY-ST-ZIP	L					-ST-ZIP				
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 reflicted by Chapter 317 Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all either like empowered of the corporation of the receiver or trustee empowered of the corporation or the receiver or trustee empowered to execute this report as reflicted by Chapter 317 Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all either like empowered of the corporation or the receiver or trustee empowered to execute this report as reflicted by Chapter 317 Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all either like empowered of the corporation or the receiver or trustee empowered to execute this report as reflicted by Chapter 317 Florida Statutes; and that my name appears in Block 10 or Block 11 if changed.										
SIGNAT	SIGNATURE: Samuel Stranburger Institute 2:76.									