

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 713456

(2)

1. Corporation Name

ST. ARMANDS KEY LUTHERAN CHURCH, INC.



Principal Place of Business

40 NORTH ADAMS DRIVE
SARASOTA FL 34236-8403

Mailing Address

40 NORTH ADAMS DRIVE
SARASOTA FL 34236-8403

3. Date Incorporated or Qualified

10/12/1967

3a. Date of Last Report

04/19/1995

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

4. FEI Number

59-1270573

Applied For

☒ Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes

☐ Yes

☒ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

ZIMMER, ROBERT J. L.
744 TYLER DRIVE
SARASOTA 34236

81 Name

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

83

84 City

FL

85 Zip Code

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

Feb 15, 1996

12. OFFICERS AND DIRECTORS

TITLE D
NAME HAGLUND, GORDON
STREET ADDRESS 2833 GULF OF MEXICO DR
CITY-ST-ZIP LONGBOAT KEY FL
☒ DELETE

TITLE VD
NAME OWENS, ANDREW
STREET ADDRESS 1638 NORTH DR
CITY-ST-ZIP SARASOTA FL
☒ DELETE

TITLE TD
NAME WILKENING, KURT
STREET ADDRESS 560 OUTRIGGER LANE
CITY-ST-ZIP LONGBOAT KEY FL
☒ DELETE

TITLE SD
NAME HENDRY, BETTY
STREET ADDRESS 770 S PALM AVE APT. 1101
CITY-ST-ZIP SARASOTA FL
☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE D
1.2 NAME LANG, KLAUS
1.3 STREET ADDRESS 3035 BAYSHORE ROAD
1.4 CITY-ST-ZIP SARASOTA FL 34234
☒ Change ☐ Addition

2.1 TITLE VD
2.2 NAME DAVID LUND
2.3 STREET ADDRESS 540 PUTTING GREEN LANE
2.4 CITY-ST-ZIP LONGBOAT KEY FL 34228
☒ Change ☐ Addition

3.1 TITLE TD
3.2 NAME KEITH LEESEBERG
3.3 STREET ADDRESS 3825 GATEWOOD DRIVE
3.4 CITY-ST-ZIP SARASOTA FL 34232
☒ Change ☐ Addition

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 do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/15/1996

Date

941/388-1234

Daytime Phone #

CR2E037 (12/95)