## 2001 UNIFORM BUSINESS REPORT (UBR)

changed, or on an attachment with an address, with all other like empowered

## **FILED** Mar 01, 2001 8:00 am<sup>3</sup> Secretary of State DOCUMENT # 713456 1. Entity Name ST. ARMANDS KEY LUTHERAN CHURCH, INC. 03-01-2001 90005 003 \*\*\*\*61.25 Principal Place of Business Mailing Address 40 NORTH ADAMS DRIVE 40 NORTH ADAMS DRIVE **SARASOTA FL 34236-8403** SARASOTA FL 34236-8403 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State Applied For City & State 4. FEI Number 59-1270573 Not Applicable Zip Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent ERIC-P:-WOGEN Street Address (P.O. Box Number is Not Acceptable) ZIMMER, ROBERT J. L. 744 TYLER DRIVE SARASOTA FL 34236 6836 Country Lakes Circle Zip Code Sarasota 34243 8. 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. February 21, 2001 **SIGNATURE** Signature, typed or printed name of registered agent and title if ap 9. Election Campaign Financing **FILE NOW:** Make Check Pavable to \$5.00 May Be Trust Fund Contribution. Department of State FEE IS \$61.25 Added to Fees 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 11. TITLE TITLE ٧D Keith Leas Burg Delete ☐ Change Addition NAME WILKENING, KURT NAME 3825 GATEWOOD MIYE 243 ROBIN DR STREET ADDRESS STREET ADDRESS SAMA SOTA, FL 34232 CITY-ST-ZIP CITY-ST-ZIP SARASOTA FL 34236 VD TITLE ☐ Delete TITLE Change ■ Addition NAME PRIMAMORE, PAUL NAME PAUL PAMAMORE STREET ADDRESS 561 GOLF LINKS LANE STREET ADDRESS CITY-ST-ZIP LONGBOAT KEY FL 34228 CITY-ST-ZIP PD TITLE Delete TITLE ☐ Change ☐ Addition MOORE, GRAY-NAME NAME. STREET ADDRESS 7569 SETH RAYNOR PL STREET ADDRESS CITY-ST-7IP SARASOTA FL 34240 CITY-ST-7/P ☐ Delete TITLE ☐ Change ☐ Addition BRUNKE, MICKEY NAME 5278 HUNTINGWOOD CT STREET ADDRESS STREET ADDRESS CITY-ST-ZIP SARASOTA FL 34235 CITY-ST-ZIP TITLE ☐ Defete K Change Addition BERKEY, JENE NAME JERE BERKEY NAME STREET ADDRESS 5420 EDGLE POINT CIRCLE STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP SARASOTA FL 34231 TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME WATERMEIER, RICHARD NAME STREET ADDRESS 306 GOLDEN GATE PT STREET ADDRESS CITY-ST-ZIP SARASOTA FL 34236 CITY-ST-ZIP 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 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 required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if

941-388-1134