SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 9, 1996.
AMOUNT DUE ON OR BEFORE 8/9/96: $155 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: $300)

NONPROFIT CORPORATION ANNUAL REPORT

1995

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

FILED
95 JUN 12 AM 9:24

DOCUMENT # **713522** **(1)**

1. Corporation Name

GRACE EVANGELICAL LUTHERAN CHURCH, THE LUTHERAN CHURCH - MISSOURI SYNOD OF FORT LAUDERDALE, FLOR

Principal Place of Business	Mailing Address
1801 NE 13TH ST FORT LAUDERDALE FL 33304	1801 NE 13TH ST FORT LAUDERDALE FL 33304

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 10/26/1967
3a. Date of Last Report: 05/01/1994
4. FEI Number: 59-0803202 ☐ 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
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status ☑ **FILING FEE IS $61.25**
8. This corporation has liability for intangible tax under s. 199.032 Florida Statutes ☐ Yes ☑ No

2. Principal Place of Business	2a. Mailing Address
21	26
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23	City & State 28
Zip 24 / Country 25	Zip 29 / Country 30

9. Name and Address of Current Registered Agent

BIELENGERG, ALBERT E. (REV.)
BIELENBERG, ALBERT E., REV.
FT. LAUDERDALE FL 33308

10. Name and Address of New Registered Agent

81 Name: Earhardt, George (Rev)
82 Street Address (P.O. Box Number is Not Acceptable): 1801 NE 13TH St
83: Fort Lauderdale FL 33304
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: Robert Graulich Treasurer June 8 1995
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	P	1.1 TITLE	☑ Change ☐ Addition President
NAME	SHERRILL, ROBERT D.	1.2 NAME	Ruth Wolverton
STREET ADDRESS	2710 S.W. 81ST TERR	1.3 STREET ADDRESS	5274 NW 30TH Court
CITY-ST-ZIP	DAVIE FL	1.4 CITY-ST-ZIP	Margate FL 33063
TITLE	DV	2.1 TITLE	☐ Change ☐ Addition
NAME	BASE, ERIC	2.2 NAME	
STREET ADDRESS	2709 N.E. 25TH CT.	2.3 STREET ADDRESS	
CITY-ST-ZIP	FT. LAUDERDALE FL	2.4 CITY-ST-ZIP	
TITLE	DS	3.1 TITLE	☑ Change ☐ Addition DS
NAME	REISING, SHERYLE	3.2 NAME	Carolyn Atchison
STREET ADDRESS	520 S.E. 10TH AVE	3.3 STREET ADDRESS	832 NW 29TH ST
CITY-ST-ZIP	POMPANO BCH. FL	3.4 CITY-ST-ZIP	Fort Lauderdale FL 33311
TITLE	T	4.1 TITLE	☐ Change ☐ Addition
NAME	GRAULICH, ROBERT	4.2 NAME	
STREET ADDRESS	2300 NE 15TH TERR	4.3 STREET ADDRESS	
CITY-ST-ZIP	WILTON MANORS FL	4.4 CITY-ST-ZIP	
TITLE	S	5.1 TITLE	☐ Change ☐ Addition
NAME	JACOBI, ROBERT S	5.2 NAME	
STREET ADDRESS	2824 NE 26TH ST	5.3 STREET ADDRESS	
CITY-ST-ZIP	FT LAUDERDALE, FL 00000	5.4 CITY-ST-ZIP	
TITLE	D	6.1 TITLE	☑ Change ☐ Addition D
NAME	OREN, ALBERT	6.2 NAME	Dr. Fred Doctor
STREET ADDRESS	3298 NW 43RD ST	6.3 STREET ADDRESS	21367 Campo Allegro Dr
CITY-ST-ZIP	FT LAUD, FL 00000	6.4 CITY-ST-ZIP	Boca Raton FL 33434

CR2E037 (3/95)

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)(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.

SIGNATURE: Robert Graulich Treasurer 6/8/95 (305) 765-2322
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

0000706