

**2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED  
Mar 14, 2011  
Secretary of State**

DOCUMENT# 721312

Entity Name: ST. JOHN LUTHERAN CHURCH AND SCHOOL OF OCALA, FLORIDA, INC.

**Current Principal Place of Business:**

1915 S.E. LAKE WEIR AVENUE  
OCALA, FL 344715498 US

**New Principal Place of Business:**

**Current Mailing Address:**

1915 S.E. LAKE WEIR AVENUE  
OCALA, FL 344715498 US

**New Mailing Address:**

FEI Number: 59-1367531      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

DEAN, SUSAN E  
230 NE 25TH AVENUE  
OCALA, FL 34470 US

**Name and Address of New Registered Agent:**

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.

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**OFFICERS AND DIRECTORS:**

Title: PRES  
Name: REESE, WILLIAM  
Address: 2227 SE 5TH STREET  
City-St-Zip: OCALA, FL 34471 US

Title: T  
Name: WILKINSON, MICHAEL  
Address: 3019 E FORT KING STREET  
City-St-Zip: OCALA, FL 34470 US

Title: S  
Name: DEAN, SUSAN  
Address: 14035 N W CR 464-B  
City-St-Zip: MORRISTON, FL 326687810

Title: V  
Name: WILLIAMS,III, ERIC  
Address: 2145 S. E. 51ST AVENUE  
City-St-Zip: OCALA, FL 34471

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

SIGNATURE: MICHAEL WILKINSON

TREA

03/14/2011

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date