FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 723560

HOPE EVANGELICAL LUTHERAN CHURCH, INC.

Principal Place of Business		Mailing Address		· ·
PO BOX 2070 9425 N.CITRUS SPRINGS BLVD. DUNNELLON FL 34430 US -		PO BOX 2070 9425 N.CITRUS SPRINGS BLVD DUNNELLON FL 34430 US	.	
2. Principal Pl	ace of Business	2a. Mailing Address		3. Date Incorporated or Qualifed
21		26		06/01/1972
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		4. FEI Number Applied For 59-1891169 Not Applicable
22		City & State		59-1891169 Not Applicable \$8.75 Additional
City & State	e			5. Certificate of Status Desired Fee Required
23 Zip	Country	Zip	Country	6 Flaction Campaign Financing \$5.00 Nav Re
24	25	29 30	,	Trust Fund Contribution Added to Fees
	9. Name and Address of Current			10. Name and Address of New Registered Agent
81 Name				
ESWORTHY, JANET			82 Stree	Address (P.O. Box Number is Not Acceptable)
4285 N MAE WEST WAY				
BEVERLY HILLS FL 34465			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 any title if applicable. (NOTE: Registered Agent signature required when reinstating)				
12.	V OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	VP	/ \	1.1 TITLE	Change Addition
NAME	COOK, LES		1.2 NAME	MATTHING, DREW CIRCLE
STREET ADDRESS	5714 W. NOBIS CIRCLE		1.3 STREET ADDRESS	
CITY-ST-ZIP	HOMOSASSA FL		1.4 CITY-ST-ZIP	Change Addition
TITLE	D	<i>i</i> =	2.1 TITLE	GRANGER EDWARD W
NAME	JACOBSON, DENNIS		2.2 NAME	1 - 2 - 11 CHILLOODING! LAKE DE.
STREET ADDRESS	1748 W. ALABAMA DR		2.3 STREET ADDRESS	HERNANDO, HL 34442-5453
CITY-ST-ZIP TITLE	CITRUS SPRINGS FL S		2. 4 CITY-ST-ZIP 3.1 TITLE	Change Addition
NAME	MORRIS, CHERYL	,	3.2 NAME	DOD SON. PATRICIA BLUD
STREET ADDRESS	11951 SE 195 PLACE		3.3 STREET ADDRESS	CITRUS SARIEST THE 34V34
CITY-ST-ZIP	DUNNELLON FL		3.4. CITY-ST-ZIP	Citrus Speins. The 34V34
TITLE	P		4.1 TITLE	Change Addition
NAME .	ESWORTHY, JANET		4. 2 NAME	
STREET ADDRESS	4285 N MAE WEST WAY		4.3 STREET ADDRES	
CITY-ST-ZIP	BEVERLY HILLS FL 34465		4.4 CITY-ST-ZiP	
TITLE	D		5.1 TITLE	Change Addition
NAME	BEAUCHAMP, ANDY		5.2 NAME	
STREET ADDRESS	5885 N ROSEBARK WAY		5.3 STREET ADDRES	
CITY-ST-ZIP	BEVERLY HILLS FL 34465		5.4 CITY-ST-ZIP	

CITRUS SPRINGS FL 34434 14. 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 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 officer or director of the corpora Block 12 or Block 13 if change

6.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

SIGNATURE:

10150 N OCEAN DR

CITY-ST-ZIP

STREET ADDRESS

TITLE

NAME

DETIERL CONSTANCE DETUERK, CONSTANCE

DELETE

FILED

03-04-1999 90227 021 ****61.25

Mar 04, 1999 8:00 am § Secretary of State

☐ Change

☐ Addition