## **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 # 728565**

1. Corporation Name

### LIVING WORD LUTHERAN CHURCH (ELCA) OF LANTANA, F LORIDA, INC.

Principal Place of Business
2116 W LANTANA ROAD
LANTANA FL 33462

Mailing Address

2116 W LANTANA ROAD LANTANA FL 33462

US

# FILED Mar 11, 1999 8:00 am § Secretary of State

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<del></del> -	lace of Business	2a. Mailing Address				3		Incorpo 08/197	rated or Q	ualifed			,		
Suite Ant	# etc	Suite, Apt. #, etc.				4		Number	<u> </u>			$\overline{}$	Apr	lied For	
	Suite, Apt. #, etc. Suite, Apt. #, etc.							15103	13	می			<del></del>	Applicable.	
City & Stat	e	City & State				5. Certificate of Status Desired							\$8.75 Additional Fee Required		
Zip	Country	Zip		intry		6			paign Fina	-				May Be	
24		30			Trust Fund Contribution  10. Name and Address of New Registered A							Added to Fees			
	9. Name and Address of Current	Registered Agent		81	Name	10	Nan	ne and A	agress of	New	Registerea	Agent	•		
				"	warne				•	٠					
BEITER, J	EFFREY			82	Street A	Address (	P.O. B	lox Numl	ber is Not	Accept	able)				
	IEAGLE DR														
	FL 33462			83											
				84	City			<del></del>				85	Zip C	ode	
		•			•						FL	.			
office or r	to the provisions of Sections 617.0502 registered agent, or both, in the State of the familiar with, and accept the obligation	f Florida. Such change was	authorized	i by t	ne corpo:	ration's b	poard o	of directo	rs. I hereb	y acce	pt the appoi	ntmen	t as reg	istered	
SIGNATURE	Signature, typed or printed name of registered agent	and title if unplicable (NO)	E: Registered	Agent	signature re-	nedw benius	reinstati	na)			DATE			<del></del>	
12.	OFFICERS AND		13.	, rageix	. signocaro ro	A 4 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1			HANGES	TO OF	FICERS AN	ID DIF	ECTO	RS IN 12	
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		*			ADDRESS										
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NAME	PIERCE, HARLAN		4. 2 N												
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			640	TV eT	710										

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 Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE

JUDIELE PHICE STORE OF SIGNING SEPTICES OF DIRECTOR DATE OF DIRECTOR DATE OF DIRECTOR DATE OF SIGNING SEPTICES OF DIRECTOR DATE OF DATE OF DIRECTOR DATE OF D

5037 (11/98)