## **FILE NOW: FILING FEE IS \$61.25**

NONPROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS** 

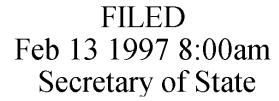
DOCUMENT #

(7)

ST. MATTHIAS LUTHERAN CHURCH OF CLEARWATER, FLOR

Principal Place of Business

Mailing Address





2751 SUNSET POINT ROAD CLEARWATER FL 34619			2751 SUNSET POINT ROAD CLEARWATER FL 34619-1504				
					3. Date Incorporated or Qualified 05/22/1975	3a. Date of Last R 03/20/19	eport 196
2. Principal Pla	ace of Business	2a. Mailing A	ddress		4. FEI Number	LA	oplied For
21		26			07-5075143	No	ot Applicable
Suite, Apt. 4	#, etc.	Suite, Ap	t. #, etc.		5. Certificate of Status Desired	us Desired S8.75 Additional Fee Required	
City & State	)	City & St	ate		6. Election Campaign Financing	\$5.00	
23	Country	28		· ·	Trust Fund Contribution	· ····	to Fees
Zip 24	25	Zip <b>29</b>	30	ountry	8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes No		
24	9. Name and Address of C			1	10. Name and Address of New Re		
				81 Name		· · · · · · · · · · · · · · · · · · ·	
FRICKS	ON, DONALD B.			82 Street A	ddoon (B.O. Box Number is Not Acceptate	Ma)	
2400 FEATHER SOUND DRIVE				82 Street Address (P.O. Box Number is Not Acceptable)			
SUITE 3				83			
CLEARWATER FL 34622				84 City		- 85 Zip	Code
	·				CHWATER		4624
11. Pursuant to office or reagent. I ar	o the provisions of Sections 61 egistered agent, or both, in the m familiar with, and accept the	7.0502 and 617.1508, F State of Florida. Such c obligations of, Section	Florida Statutes, the change was authori 617.0503, Florida S		corporation submits this statement for the poration's board of directors. I hereby acceptant	ourpose of changing it of the appointment as	s registered registered
SIGNATURE _							
	Signalure, typed or printed name of register			······································	equired when reinstating)  ADDITIONS/CHANGES TO OFFICE	DATE	10 IN 10
12.		S AND DIRECTORS	-	3. 1 TITLE	ADDITIONS/CHANGES TO OFFIC	Change	Addition 6
TITLE	PD CANDDA	L.		Ī		C Citoring	
NAME	ZANK, SANDRA 2771 CAMDEN ROAD			2 NAME			
STREET ADDRESS	CLEARWATRR FL		1	3 STREET ADDRESS			ונו פר
CITY-ST-ZIP TITLE	VD			4 CITY - ST - ZIP 1 TITLE		Change	Addition
NAME	KOCH, JEFF	•		2 NAME	and the second second second		
STREET ADORESS				3 STREET ADDRESS			
CITY-ST-ZIP	DUNEDIN FL	***		4 CITY-ST-ZIP			İ
TITLE	SD			1 TITLE	······································	Change	Addition
NAME	ANTHONY, DOROTHY		3.	2 NAME			
STREET ADDRESS	205 LOTUS DRIVE		3.	3 STREET ADDRESS			
City-St-ZiP	SAFETY HARBOR FL		3.	4. CITY-ST-ZIP			
TITLE	TD		DELETE 4.	1 TITLE		<b>L</b> Change	Addition
NAME	ERICKSON, DONALD		4.	2 NAME	MA ARTHUR		
STREET ADDRESS				3 STREET ADDRESS	1314 MARSEILLES CH CLEARWATER F		
CITY-ST-ZIP	CLEARWATER FL			4 CITY-ST-ZIP	'CLGARWATER F		
TITLE		L	_] DELETÉ 5.	1 TITLE		Change	☐ Addition
NAME			5.	2 NAME			
STREET AODRESS			5.	3 STREET ADDRESS			
CITY-ST-ZIP		·····		4 CITY - ST - ZIP		T At a second	Addition
THILE		L		1 TITLE		[] Change	Addition
NAME				2 NAME			
STREET ADDRESS				3 STREET ADDRESS			
CITY-ST-ZIP			6.	4 CITY-ST-ZIP	d la Passa 110 07/07/0 Electric Crothdo	14 362 224 362	

I do 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.

GNATURE:

2/5/97

8/8 3390

CRATURE:

SIGNATURE: