

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 16, 2004 8:00 am
Secretary of State

02-16-2004 90037 019 ****61.25

DOCUMENT # 733111

1. Entity Name

BETHEL LUTHERAN CHURCH, INC.



Principal Place of Business

3166 MCMULLEN BOOTH ROAD
CLEARWATER FL 33761
US

Mailing Address

3166 MCMULLEN BOOTH ROAD
CLEARWATER FL 33761
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-1608203

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

DAYHOFF, CHARLES S., III
CORNERSTONE CENTER
3830 TAMPA RD. SUITE 150
PALM HARBOR FL 34684

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25
Due By May 1, 2004

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE VPD ☒ Delete
NAME HARPSTER, WILLIAM
STREET ADDRESS 60 COLLETTE COURT SOUTH
CITY-ST-ZIP OLDSMAR FL 34677

TITLE PD ☐ Delete
NAME HUGHES, JOHN J JR
STREET ADDRESS 1302 GULFVIEW WOODS LANE
CITY-ST-ZIP TARPON SPRINGS FL 34689

TITLE SD ☒ Delete
NAME LACKMANN, LUGENE
STREET ADDRESS 4978 EDGEWATER LANE
CITY-ST-ZIP OLDSMAR FL 34677

TITLE TD ☐ Delete
NAME RIKANSRUD, HELEN
STREET ADDRESS 433 S. PAULA DR APT 28
CITY-ST-ZIP DUNEDIN FL 34698

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE VPD ☒ Change ☐ Addition
NAME Lee Tieman
STREET ADDRESS 1343 Eniswood Parkway
CITY-ST-ZIP Palm Harbor, FL. 34683

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE SD ☒ Change ☐ Addition
NAME Andrea Ay
STREET ADDRESS 1161 Lindenwood Dr.
CITY-ST-ZIP Tarpon Springs, FL. 34689

TITLE TD ☒ Change ☐ Addition
NAME Helen Rikansrud
STREET ADDRESS 1639 Fieldfare Ct.
CITY-ST-ZIP Dunedin, FL. 34698

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Helen Rikansrud

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

02-03-04 921-133-6351

Date

Daytime Phone #