

**2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)**

**FILED**  
**Apr 20, 2005 8:00 am**  
**Secretary of State**

04-20-2005 90330 046 \*\*\*\*61.25



**DOCUMENT # 734904**  
 1. Entity Name  
**THE CHURCH OF THE INCARNATION (LUTHERAN) OF SILVER SPRINGS SHORES, OCALA, FLORIDA, INC.**

Principal Place of Business: **9300 SPRING RD OCALA FL 34472**  
 Mailing Address: **9300 SPRING RD OCALA FL 34472**

2. Principal Place of Business: Suite, Apt. #, etc.  
 3. Mailing Address: Suite, Apt. #, etc.

City & State: \_\_\_\_\_  
 City & State: \_\_\_\_\_

Zip: \_\_\_\_\_ Country: \_\_\_\_\_  
 Zip: \_\_\_\_\_ Country: \_\_\_\_\_



1st MOORE CR2E037 (10/04)

4. FEI Number: **59-2925821** Applied For:  Not Applicable:

5. Certificate of Status Desired:  **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent:  
**ST LAURENT, REBECCA**  
**3655 SE 56TH TERR**  
**OCALA FL 34471**

7. Name and Address of New Registered Agent:  
 Name: **DON WEBER**  
 Street Address (P.O. Box Number is Not Acceptable): **307 BAHIA CIRCLE**  
 City: **OCALA** FL Zip Code: **34472**

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: *Florence E. Parnham, Don Weber* DATE: **4/11/05**

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, 2005**

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		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE: <input checked="" type="checkbox"/> Delete	<b>WEBER, DON</b> 307 BAHIA CIRCLE OCALA FL 34472	TITLE: <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	<b>PRESIDENT</b>
TITLE: <input checked="" type="checkbox"/> Delete	<b>RICCI, STEPHEN</b> 14 CEDAR TRACE RUN OCALA FL 34472	TITLE: <input checked="" type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	<b>SAME</b>
TITLE: <input type="checkbox"/> Delete	<b>SD - STRONG, BARBARA</b> 14 CEDAR TRACE BEND SAINT CLOUD FL 34772	TITLE: <input type="checkbox"/> Change <input type="checkbox"/> Addition	<b>V. PRESIDENT</b>
TITLE: <input type="checkbox"/> Delete	<b>D STRONG, BRADLEY</b> 12511 SE 120TH STREET OCKLAWAHA FL 32179	TITLE: <input type="checkbox"/> Change <input type="checkbox"/> Addition	<b>MARTIN HANEY</b>
TITLE: <input checked="" type="checkbox"/> Delete	<b>V MAUGE, GARY</b> 4605 NE 21ST CT OCALA FL 34479	TITLE: <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	<b>10861 S.E. 72ND TER</b>
TITLE: <input type="checkbox"/> Delete	<b>PARNHAM, FLORENCE E</b> 6997 EASY ST OCALA FL 34472	TITLE: <input type="checkbox"/> Change <input type="checkbox"/> Addition	<b>BELEVUE, FL 34420</b>
TITLE: <input type="checkbox"/> Delete		TITLE: <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	<b>FIN. SEC.</b>
TITLE: <input type="checkbox"/> Delete		TITLE: <input type="checkbox"/> Change <input type="checkbox"/> Addition	<b>CAROLINE BUCCOLO</b>
TITLE: <input type="checkbox"/> Delete		TITLE: <input type="checkbox"/> Change <input type="checkbox"/> Addition	<b>493 EMERALD RD.</b>
TITLE: <input type="checkbox"/> Delete		TITLE: <input type="checkbox"/> Change <input type="checkbox"/> Addition	<b>OCALA, FL 34420</b>

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: *Florence E. Parnham* DATE: **4/11/05** TIME: **352/687-1159**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #