

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED  
Apr 23, 2009  
Secretary of State

DOCUMENT# 734904

**Entity Name:** THE CHURCH OF THE INCARNATION (LUTHERAN) OF SILVER SPRINGS SHORES, OCALA, FLORIDA, INC.

**Current Principal Place of Business:**

9300 SPRING RD  
OCALA, FL 34472

**New Principal Place of Business:**

**Current Mailing Address:**

9300 SPRING RD  
OCALA, FL 34472

**New Mailing Address:**

FEI Number: 59-2925821      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)

**Name and Address of Current Registered Agent:**

WEBER, DON  
307 BAHIA CIRCLE  
OCALA, FL 34472      US

**Name and Address of New Registered Agent:**

LASALLE, STEVE  
32 SPRING LOOP  
OCALA, FL 34472      US

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.

SIGNATURE: STEVE LASALLE

04/23/2009

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: WEBER, DON  
Address: 307 BAHIA CIRCLE  
City-St-Zip: OCALA, FL 34472

Title: VD ( ) Delete  
Name: FULLER, MAURICE  
Address: 591-A FAIRWAYS CIRCLE  
City-St-Zip: OCALA, FL 344722255

Title: S ( ) Delete  
Name: BARBARA, STRONG  
Address: POST OFFICE BOX 1 810  
City-St-Zip: BELLEVIEW, FL 34421

Title: D ( ) Delete  
Name: MCBEAN, EVERLENE  
Address: 30 SPRING TRACE  
City-St-Zip: OCALA, FL 34472

Title: D ( ) Delete  
Name: LASALLE, STEVE  
Address: 32 SPRING LOOP  
City-St-Zip: OCALA, FL 434472

Title: TD ( ) Delete  
Name: PARNHAM, FLORENCE  
Address: 32 SPRING LOOP  
City-St-Zip: OCALA, FL 34472

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: P (X) Change ( ) Addition  
Name: LASALLE, STEVE  
Address: 32 SPRING LOOP  
City-St-Zip: OCALA, FL 34472

Title: VD (X) Change ( ) Addition  
Name: BOWERS, MARGARET  
Address: 11 BAHIA LOOP  
City-St-Zip: OCALA, FL 344722255

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: D (X) Change ( ) Addition  
Name: SINSMEISTER, DOROTHY  
Address: POST OFFICE BOS 1509  
City-St-Zip: OCKLAWAHA, FL 32183

Title: D (X) Change ( ) Addition  
Name: BRADLEY, STRONG  
Address: 12511 S.E. 120 STREET  
City-St-Zip: OCALA, FL 32179

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: STEVE LASALLE

P

04/23/2009

Electronic Signature of Signing Officer or Director

Date