

# **2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 737992

**FILED**  
**Mar 20, 2012**  
**Secretary of State**

**Entity Name:** FIRST LUTHERAN CHURCH OF INVERNESS INC. FLORIDA-GEORGIA DISTRICT MISSOURI SYNOD

**Current Principal Place of Business:**

FIRST LUTHERAN CHURCH  
1900 WEST HWY 44  
INVERNESS, FL 34453 US

**New Principal Place of Business:**

**Current Mailing Address:**

FIRST LUTHERAN CHURCH  
1900 WEST HWY 44  
INVERNESS, FL 34453 US

**New Mailing Address:**

**FEI Number:** 59-1299051

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

BEAVERSON, REV. THOMAS R  
1900 W HWY 44  
INVERNESS, FL 34453 US

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

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:

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: VP  
Name: BRUNTON, JERRY  
Address: 3173 N LAMBETH PATH  
City-St-Zip: HERNANDO, FL 34442

Title: FS  
Name: DELONG, BARBARA  
Address: 1881 CR 243D  
City-St-Zip: WILDWOOD, FL 34785

Title: T  
Name: IVERSON, ROBERT I  
Address: POB 2015  
City-St-Zip: INVERNESS, FL 34451

Title: P  
Name: WARNER, HOWARD  
Address: 5822 E TENISON STREET  
City-St-Zip: INVERNESS, FL 34452

Title: S  
Name: BRUTON, KATHY  
Address: 3173 N LAMBERT PATH  
City-St-Zip: HERNANDO, FL 34442

I hereby 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 all other like empowered.

SIGNATURE: HOWARD WARNER

P

03/20/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date