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Secretary of State

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NONPROFIT CORPORATION ANNUAL REPORT 1999				FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # 741979					
1. Corporation Name CHURCH OF THE REDEEMER					
Principal Place of Business 222 SOUTH PALM AVE SARASOTA FL 34236			Mailing Address 222 SOUTH PALM AVE SARASOTA FL 34236		



2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified	
21 Suite, Apt. #, etc.		26 Suite, Apt. #, etc.		03/13/1978	
22 City & State		27 City & State		4. FEI Number	
23 Zip		28 Zip		59-0751911	
24 Country		29 Country		30	
9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent	
LAMBRECHT, WILLIAM G 200 SOUTH ORANGE AVE SARASOTA FL 34230				81 Name	
				82 Street Address (P.O. Box Number is Not Acceptable)	
				83	
				84 City	
				85 Zip Code	
FL					

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D	1.1 TITLE	D
NAME	BOEDECKER, JACKI F	1.2 NAME	Johnson, Edward Reginald
STREET ADDRESS	1607 NORTH DRIVE	1.3 STREET ADDRESS	4800 Riverview Ave.
CITY-ST-ZIP	SARASOTA FL 34239	1.4 CITY-ST-ZIP	Sarasota FL 34231
TITLE	SD	2.1 TITLE	SD
NAME	WEBER, EDWARD	2.2 NAME	Lambrecht, William Genther
STREET ADDRESS	4763 GREENWICH RD	2.3 STREET ADDRESS	1714 S. Lake Shore Drive
CITY-ST-ZIP	SARASOTA FL	2.4 CITY-ST-ZIP	Sarasota FL 34231
TITLE	D	3.1 TITLE	D
NAME	BANKAUF, WILLIAM F	3.2 NAME	Smith, James K.
STREET ADDRESS	4322 HIGHLAND OAKS CIRCLE	3.3 STREET ADDRESS	2601 Wisteria Street
CITY-ST-ZIP	SARASOTA FL 34235	3.4 CITY-ST-ZIP	Sarasota FL 34239
TITLE	T	4.1 TITLE	T
NAME	CONOVER, PHILIP L	4.2 NAME	Muehlman, Albert John
STREET ADDRESS	8218 CYPRESS HOLLOW DRIVE	4.3 STREET ADDRESS	7600 Calle Facil
CITY-ST-ZIP	SARASOTA FL	4.4 CITY-ST-ZIP	Sarasota FL 34238
TITLE	DP	5.1 TITLE	
NAME	ROBINSON, FREDRICK	5.2 NAME	
STREET ADDRESS	1525 GULF VIEW DR	5.3 STREET ADDRESS	
CITY-ST-ZIP	SARASOTA, FL 00000	5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. 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 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, with all other like empowered.

SIGNATURE:

Fredrick A. Robinson
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Fredrick A. Robinson 4.27.99 (941) 955-4263

Date

Daytime Phone #

CR2E037 (1/98)