

4-28-97

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FILE NOW: FILING FEE IS \$61.25

FILED

Apr 28 1997 8:00am
Secretary of StateNONPROFIT
CORPORATION
ANNUAL REPORT
1997FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 744803 (8)

1. Corporation Name

ROGATE LUTHERAN CHURCH OF THE DEAF, INC.

Principal Place of Business

Mailing Address

4825 EAST BAY DR.
CLEARWATER FL 34624-38824825 EAST BAY DR.
CLEARWATER FL 34624-68003. Date Incorporated or Qualified
11/02/19783a. Date of Last Report
03/18/1996

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip Country

28 Zip Country

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25

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4. FEI Number

59-1974227

Applied For

Not Applicable

5. Certificate of Status Desired

☐\$8.75 Additional
Fee Required6. Election Campaign Financing
Trust Fund Contribution☐\$5.00 May Be
Added to Fees8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes☐ Yes☒ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

TANFIELD, RONALD W.
6663 TIMBERWOOD CIR.
PINELLAS PARK FL 34685

81 Name

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

83

84 City

FL

85

Zip Code

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's signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE PD
NAME SMITH, RUTH
STREET ADDRESS 19815 GUNN HWY
CITY-ST-ZIP TAMPA FL1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIPTITLE TD
NAME TANFIELD, RONALD
STREET ADDRESS 6663 TIMBERWOOD CIR. NO.
CITY-ST-ZIP PINELLAS PARK FL2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIPTITLE SD
NAME STORM, ALICE
STREET ADDRESS 125 PALMETTO LN
CITY-ST-ZIP LARGO FL3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIPTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIPTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIPTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I do 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.

SIGNATURE

4/28/97

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CR2E037 (9/96)