

FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT 1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 753587 (5)

1. Corporation Name

GRACE EVANGELICAL LUTHERAN CHURCH OF LAKELAND, FLORIDA, INC.



Principal Place of Business

Mailing Address

745 S INGRAHAM AVE
LAKELAND FL 33801

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LAKELAND FL 33801

3. Date Incorporated or Qualified
08/01/1980

3a. Date of Last Report
04/20/1995

2. Principal Place of Business

2a. Mailing Address

21

26

4. FEI Number
59-0823946

Applied For
Not Applicable

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

5. Certificate of Status Desired

\$8.75 Additional Fee Required

City & State

City & State

23

28

6. Election Campaign Financing Trust Fund Contribution

\$5.00 May Be Added to Fees

Zip

Country

Zip

Country

24

25

29

30

8. 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

MATTSON, WALTER R. (ESQUIRE)
1240 E. LIME STREET
LAKELAND FL 33801

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)
1100 Oakbridge Pkwy., #201

83

84 City

Lakeland

FL

85 Zip Code
33803

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 any)

(NOTE: Registered Agent signature required when not filing)

DATE

12. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	DELETED
P	MCPEAK, BARBARA	3804 ERIC CT	LAKELAND FL 33813	<input checked="" type="checkbox"/>
T	SILVER, RICHARD	5325 MONTERRAT DR	LAKELAND FL	<input type="checkbox"/>
D	CARPANINI, BARBARA	2310 MAGNOLIA AVE	LAKELAND FL	<input type="checkbox"/>
D	FLEKKE, MARY	2021 WINDWARD PASS	LAKELAND FL 33813	<input type="checkbox"/>
D	CARNS, BEN	135 COUNTRY CLUB LN	MULBERRY FL 33860	<input checked="" type="checkbox"/>
D	KINDER, DAVID	1115 E PALMETTO ST	LAKELAND FL 33801	<input type="checkbox"/>

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	DELETED	ADDED
P	HERRICK, JoANN	241 FIVE IRON DR.	MULBERRY, FL 33860	<input type="checkbox"/>	<input checked="" type="checkbox"/>
D	LAWRENCE, LARRY	742 SAGEWOOD DR.	LAKELAND, FL 33813	<input type="checkbox"/>	<input checked="" type="checkbox"/>

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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:

Mary M. Flekke
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/24/96

680-4164(941)
DATE

CR2E037 (12/95)