### FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

#### Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

## **DOCUMENT # 753587**

1. Corporation Name

### GRACE EVANGELICAL LUTHERAN CHURCH OF LAKELAND, F LORIDA, INC.

Prir	ICI	pai	Place	of	Busii	1es
745	S	IN	GRAHA	М	AVE	

2. Principal Place of Business

LAKELAND FL 33801

Mailing Address

745 S INGRAHAM AVE LAKELAND FL 33801

2a. Mailing Address

# **FILED** Mar 22, 1999 8:00 am § Secretary of State

03-22-1999 90073 025 \*\*\*\*61.25



3. Date Incorporated or Qualifed

08/01/1980

21						08/01/1980							
Suite, Apt. #, etc.		Suite, Apt. #, etc.			4. FEI Number	Applied For							
22						59-0823946			Applicable				
City & State		City & State				5. Certifcate of Status Desired		\$8.75 A					
23		28						Fee Red					
Zip	Country	Zip Country		,		6. Election Campaign Financing		\$5.00					
24	25 29 30					Trust Fund Contribution		Added to	Fees				
Name and Address of Current Registered Agent						10. Name and Address of New I	Registered A	gent					
,					ame	•							
✓ CARPANINI, MARK F					82 Street Address (P.O. Box Number is Not Acceptable)								
5725 SCOTT LAKE HILLS LANE													
LAKELAND FL 33813													
				1	ity			85 Zip C	ode				
			84	-	•		<u>FL</u>						
11. Pursuant	to the provisions of Sections 617.0502 a	ind 617.1508, Florida Statutes	the above	e-na	med corpor	ation submits this statement for the	purpose of o	changing its i	egistered				
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 as	nd title if applicable. (NOTE: R	egistered Agei	nt sig	nature required v	vhen reinstating)	DATE						
12.	OFFICERS AND		13.			ADDITIONS/CHANGES TO OF	FICERS AN						
TIFLE	D	□ DELETE	1.1 TITLE					☐ Change	☐ Addition				
NAME	NAME HERRICK, JOANN			1.2 NAME									
STREET ADDRESS	241 FIVE IRON DR		1.3 STREE	STREET ADDRESS									
CITY+ST-ZIP	T			T-ZII	,								
TITLE	T D	☐ DELETE	2.1 TITLE					Change	☐ Addition				
NAME	POWERS, LYNN		2.2 NAME		Ì								
•			2.3 STREET ADDRESS										
CITY-ST-ZIP	LAKELAND FL	-	2. 4 CITŸ-S	ST-ZI	P	*							
TITLE	D 4	☐ DELETE	3.1 TITLE					Change	Addition				
NAME	<del>-</del>		3.2 NAME						İ				
STREET ADDRESS	545 MARKET SQUARE W		3.3 STREET ADDRESS		DRESS								
CITY-ST-ZIP	LAKELAND FL		3.4. CITY- S	ST-ZI	Р								
TITLE	P	☐ DELETE	4.1 TITLE		_ \			☐ Change	Addition				
NAME	 McPeak,-Barbara		4. 2 NAME		Br	uce Perdue							
STREET ADDRESS	3804 ERIC COURT	<i>y</i>	4.3 STREE	TAD	DRESS 55	83 Bloomfield Blvd							
CITY-ST-ZIP	LAKELAND FL-33813		4.4 CITY-S	ST-ZIF	- <u>L</u> a	keland, Fl. 33810							
TITLE	D	☐ DELETE	5.1 TITLE					☐ Change	☐ Addition				
NAME	LAWRENCE, LARRY		5.2 NAME		-								
STREET ADDRESS	l		5.3 STREE	TAD	ORESS								
CITY-ST-ZIP	LAKELAND FL	_	5.4 CITY- S	ST-ZIF	<u> </u>								
TITLE	D	DELETE	6.1 TITLE					Change	☐ Addition				
NAME :	KINDER; DAVID		6.2 NAME										
	1115 E PALMETTO ST		6.3 STREE	T ADI	DRESS								
			6.4 CITY-S	ST-ZII	-								
CHILDISCH (					<del></del>			if, that the in					

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

(941)686-5585