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NONPROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
 Secretary of State
 DIVISION OF CORPORATIONS

DOCUMENT # 755423

1. Corporation Name

IMMANUEL LUTHERAN CHURCH OF BRANDON, FLORIDA, IN C.

Principal Place of Business

2913 SO. JOHN MOORE ROAD
 BRANDON FL 33511

Mailing Address

2913 SO. JOHN MOORE ROAD
 BRANDON FL 33511



2. Principal Place of Business

2a. Mailing Address

3. Date Incorporated or Qualified

12/08/1980

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

4. FEI Number

59-1295945

Applied For

Not Applicable

23 City & State

27 City & State

5. Certificate of Status Desired

\$8.75 Additional Fee Required

24 Zip

25 Country

28 Zip

29 Country

6. Election Campaign Financing

\$5.00 May Be Added to Fees

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

ROBINSON, ROGER REV. (SENIOR PASTOR)
 2730 GOLF LAKE DR.
 PLANT CITY FL 33567

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 signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE DELETE

1.1 TITLE Change Addition

NAME P
 DIGNUM, DALE
 STREET ADDRESS 2511 MASON OAKS DR
 CITY-ST-ZIP VALRICO FL 33594

1.2 NAME
 1.3 STREET ADDRESS
 1.4 CITY-ST-ZIP

TITLE VP DELETE

2.1 TITLE Change Addition

NAME CHEEK, JOEY
 STREET ADDRESS 2727 ST CLOUD OAKS
 CITY-ST-ZIP VALRICO FL 33594

2.2 NAME
 2.3 STREET ADDRESS
 2.4 CITY-ST-ZIP

TITLE TD DELETE

3.1 TITLE Change Addition

NAME SZCZESNY, ROBERT
 STREET ADDRESS 2913 S. JOHN MOORE RD.
 CITY-ST-ZIP BRANDON FL 33511

3.2 NAME
 3.3 STREET ADDRESS
 3.4 CITY-ST-ZIP

TD
 ROBERT SZCZESNY
 2209 EAGLE BLUFF
 VALRICO FL. 33594

TITLE AMD DELETE

4.1 TITLE Change Addition

NAME MORESCO, ANGELA
 STREET ADDRESS 3636 WOODHILL DRIVE
 CITY-ST-ZIP BRANDON FL

4.2 NAME
 4.3 STREET ADDRESS
 4.4 CITY-ST-ZIP

AMD
 ANGELA MORESCO
 3636 WOODHILL DR.
 BRANDON FL 33511

TITLE SD DELETE

5.1 TITLE Change Addition

NAME PLUMB, FAITH
 STREET ADDRESS 1909 COCO MEADOW CIR 306
 CITY-ST-ZIP BRANDON FL 33511

5.2 NAME
 5.3 STREET ADDRESS
 5.4 CITY-ST-ZIP

RSD
 FAITH PLUMB
 3017 PARTRIDGE POINT TRAIL
 VALRICO FL 33594

TITLE DELETE

6.1 TITLE Change Addition

NAME
 STREET ADDRESS
 CITY-ST-ZIP

6.2 NAME
 6.3 STREET ADDRESS
 6.4 CITY-ST-ZIP

FSD
 IRENE DAVIS
 1304 ROCKWOOD DR.
 BRANDON FL 33510

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:

Angela Moresco
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/15/99
 Date

813/689-1787
 Daytime Phone #

CR2E037 (1/198)