

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 15, 2002 8:00 am
Secretary of State

01-15-2002 90063 022 ****61.25

DOCUMENT # 755423

1. Entity Name

IMMANUEL LUTHERAN CHURCH OF BRANDON, FLORIDA, IN

Principal Place of Business

Mailing Address

2913 SO. JOHN MOORE ROAD
 BRANDON FL 33511

2913 SO. JOHN MOORE ROAD
 BRANDON FL 33511

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country



DO NOT WRITE IN THIS SPACE

4. FEI Number **59-1295945**

Applied For
 Not Applicable

5. Certificate of Status Desired **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

FARNSWORTH, KENNETH W
1418 NEW BRITAIN DRIVE
BRANDON FL 33511

Name

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

City

FL

Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the state of Florida.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25

9. Election Campaign Financing Trust Fund Contribution.

\$5.00 May Be Added to Fees

Make Check Payable to Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	P	<input type="checkbox"/> Delete
NAME	CREEK, JOEY	
STREET ADDRESS	2727 ST CLOUD OAKS	
CITY-ST-ZIP	VALRICO FL 33594	
TITLE	VP	<input type="checkbox"/> Delete
NAME	WENDELL, LATTZ	
STREET ADDRESS	2531 MASON OAKS DR	
CITY-ST-ZIP	VALRICO FL 33594	
TITLE	TD	<input type="checkbox"/> Delete
NAME	SZCZESNY, ROBERT	
STREET ADDRESS	2209 EAGLE BLUFF	
CITY-ST-ZIP	VALRICO FL	
TITLE	AMD	<input type="checkbox"/> Delete
NAME	MORESCO, ANGELA	
STREET ADDRESS	3636 WOODHILL DRIVE	
CITY-ST-ZIP	BRANDON FL	
TITLE	RSD	<input type="checkbox"/> Delete
NAME	PLUMB, FAITH	
STREET ADDRESS	3017 PARTRIDGE POINT TR	
CITY-ST-ZIP	VALRICO FL 33511	
TITLE	FSD	<input type="checkbox"/> Delete
NAME	DAVIS, IRENE	
STREET ADDRESS	1304 ROCKWOOD DR	
CITY-ST-ZIP	BRANDON FL	

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	VP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BRIAN ALEXANDER	
STREET ADDRESS	3121 S. MILLER RD.	
CITY-ST-ZIP	VALRICO FL 33594	
TITLE	TD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	DALE DIGNUM	
STREET ADDRESS	2511 MASON OAKS DR.	
CITY-ST-ZIP	VALRICO FL 33594	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address with all other like empowered.

SIGNATURE:

Angela Moresco Director of Operations 1/17/02 813/ 689-1787

CR2E037 (9/01)