

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 21, 2004 8:00 am
Secretary of State

07-21-2004 90020 032 ****61.25

DOCUMENT # 766395

1. Entity Name
ADVENT LUTHERAN CHURCH OF MELBOURNE, INC.



Principal Place of Business
**7550 N WICKHAM ROAD
MELBOURNE, FL 32940**

Mailing Address
**7550 N WICKHAM ROAD
MELBOURNE, FL 32940**

54063906



07142004 No Chg-NP CR2E037 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-2256683

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

**BETTIN, BRADLY ROGER
96 WILLARD STREET, SUITE 302
COCOA, FL 32922**

**DO NOT WRITE
IN THIS SPACE**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$61.25
Due by September 8, 2004**

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE	PD	CATHY SCHWEINSBERG
NAME	HALL, DAVID	850 BELHURST LN
STREET ADDRESS	1007 FABIEN CIRCLE	ROCKLEDGE FL 32955
CITY-ST-ZIP	MELBOURNE, FL 32940	
TITLE	TD	Nancy Buzzard
NAME	CARRAWAY, ROMAN	4004 ESTANCIA WAY
STREET ADDRESS	5003 COCOPLUM AVE.	MELBOURNE FL 32940
CITY-ST-ZIP	MELBOURNE, FL 32940	
TITLE	PD	ZAHN, TONI
NAME	ZAHN, TONI	706 BAY VIEW COURT
STREET ADDRESS	706 BAY VIEW COURT	MELBOURNE, FL 32940
CITY-ST-ZIP	MELBOURNE, FL 32940	
TITLE	SD	GRETA BAUMANN
NAME	BUZZARD, NANCY	931 WILLOWOOD DRIVE
STREET ADDRESS	4004 ESTANCIA WAY	MELBOURNE FL 32940
CITY-ST-ZIP	MELBOURNE, FL 32940	
TITLE	ATD	Carraway, Roman
NAME	Carraway, Roman	5053 Cocoplum
STREET ADDRESS	5053 Cocoplum	Melbourne FL 32940
CITY-ST-ZIP	Melbourne FL 32940	
TITLE		
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

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IN THIS SPACE**

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Roman Carraway

7/14/04

321-259-8515

Date

Daytime Phone #