09021999-90006-037-$61.25-$61.25

AMOUNT DUE ON OR BEFORE 09/15/99: $61.25 (IF DISSOLVED, MINIMUM AMOUNT DUE [redacted]: $236.25).

NONPROFIT CORPORATION ANNUAL REPORT

1999

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

FILED
99 OCT 14 PM 1:29
SECRETARY OF STATE
TALLAHASSEE FLORIDA

DOCUMENT # 766745

1. Corporation Name
SALEM LUTHERAN CHURCH, INC.

Principal Place of Business	Mailing Address
7900 APOPKA-VINELAND RD. ORLANDO FL 32819	7900 APOPKA-VINELAND RD. ORLANDO FL 32819

2. Principal Place of Business 21	2a. Mailing Address 26	3. Date Incorporated or Qualified 01/30/1983
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27	4. FEI Number 59-2257041 ☐ Applied For ☐ Not Applicable
City & State 23	City & State 28	5. Certificate of Status Desired ☐ $8.75 Additional Fee Required
Zip / Country 24 / 25	Zip / Country 29 / 30	6. Election Campaign Financing Trust Fund Contribution ☐ $5.00 May Be Added to Fees

9. Name and Address of Current Registered Agent

LINNELL, PAUL
9025 FLORIBUNDA DR
ORLANDO FL 32818

10. Name and Address of New Registered Agent

81 Name: Brooks, Steve
82 Street Address (P.O. Box Number is Not Acceptable): 303 Bayside Ave.
83
84 City: Winter Garden FL 85 Zip Code: 34787

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: Steve Brooks Steve Brooks (Signature, typed or printed name of registered agent and title if applicable) (NOTE: Registered Agent Signature required when reinstating) DATE: 10/10/99

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	PD	☑ DELETE	1.1 TITLE	PRESIDENT PD	☑ Change ☐ Addition
NAME	LINNELL, PAUL		1.2 NAME	BROOKS, STEVE	
STREET ADDRESS	9025 FLORIBUNDA DR		1.3 STREET ADDRESS	303 BAYSIDE AVE	
CITY-ST-ZIP	ORLANDO FL 32818		1.4 CITY-ST-ZIP	WINTER GARDEN, FL 34787	
TITLE	VPD	☑ DELETE	2.1 TITLE	VICE PRESIDENT VPD	☑ Change ☐ Addition
NAME	PHARR, LEIGH		2.2 NAME	BURNS, JEFF	
STREET ADDRESS	2937 EAGLE LAKE DR		2.3 STREET ADDRESS	24 Heather Creek Ct.	
CITY-ST-ZIP	ORLANDO FL 32282		2.4 CITY-ST-ZIP	Ocoee, FL 34761	
TITLE	TT	☑ DELETE	3.1 TITLE	Treasurer TT	☐ Change ☐ Addition
NAME	RUEMLER, LYNN		3.2 NAME	JONES, STEVE	
STREET ADDRESS	700 ROSEMERE CIR		3.3 STREET ADDRESS	5771 Crandale Dr.	
CITY-ST-ZIP	ORLANDO FL 32835		3.4 CITY-ST-ZIP	Orlando, FL 32819	
TITLE	AT	☐ DELETE	4.1 TITLE		☐ Change ☐ Addition
NAME	MAGNUSON, LINDA		4.2 NAME		
STREET ADDRESS	8416 INDIAN WELLS CT.		4.3 STREET ADDRESS		
CITY-ST-ZIP	ORLANDO FL		4.4 CITY-ST-ZIP		
TITLE	SD	☑ DELETE	5.1 TITLE	Secretary SD	☐ Change ☐ Addition
NAME	RUNDLE, WILLIAM		5.2 NAME	Gunter, Matt	
STREET ADDRESS	6408 HILL O SANDS CT		5.3 STREET ADDRESS	1005 Autumn Leaf Dr.	
CITY-ST-ZIP	ORLANDO FL 32819		5.4 CITY-ST-ZIP	Winter Garden, FL 34787	
TITLE		☐ DELETE	6.1 TITLE	TS	☐ Change ☐ Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP			6.4 CITY-ST-ZIP		

CR2E037 (5/99)

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: Steve Brooks ESQUIRE Steve Brooks 8/14/99 407/649-9012
(SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR) (Date) (Daytime Phone #)