

FILE NOW: FILING FEE AFTER MAY 1 IS \$155.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Northam
Secretary of State
DIVISION OF CORPORATIONS

APPROVED
AND
FILED

95 MAR -2 PM 2: 55

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # 770344 (0)

1. Corporation Name

SAINT MICHAEL EVANGELICAL LUTHERAN CHURCH OF WELLINGTON, FLORIDA, INC.

Principal Place of Business

Mailing Address

1925 BIRKDALE DRIVE
WEST PALM BEACH FL 33414

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WEST PALM BEACH FL 33414

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

09/22/1983

3a. Date of Last Report

02/17/1994

4. FEI Number

59-2387200

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

\$5.00 May Be
Added to Fees

7. Nonprofit with IRS 501(c)(3)
Tax Exempt Status

\$68.75 Supplemental
Fee Not Required

8. This corporation has liability for intangible tax under S. 199.032,
Florida Statutes.

Yes ☐ No ☒

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

23 City & State

27 City & State

24 Zip Country

28 Zip Country

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

HOOPER, GEORGE
1935 BIRKDALE DRIVE
WELLINGTON FL 33414

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 607.0502 and 607.1508, 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 607.0505, 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

TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP
PD	WOLFE, JAN	917 BRIARWOOD DRIVE WEST PALM BEACH FL	
VD	JANKE, JAMES	147 KINGS WAY ROYAL PALM BEACH FL	
ST	TAGG, DONNA	8838 WENDY LANE SOUTH ROYAL PALM BEACH FL	
TD	TEDAMONSON, JACKIE	14564 ROLLING ROCK WELLINGTON FL	
FSD	VORPHAL, TOM	2550 COUNTRY GOLF DRIVE WELLINGTON FL	
D	BURT, MONTA	843 LEMONGRASS LANE WELLINGTON FL	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	1.2 NAME	1.3 STREET ADDRESS	1.4 CITY - ST - ZIP	Change	Addition
PD	Keith Wilman	2742 Yarmouth DR Wellington F1 33414		☒	☐
VD	Donna Tagg	8838 Wendy Lane South West Palm Beach FL 33411		☒	☐
ST	Ken Klammer	14160 Greentree Drive Wellington FL 33414		☐	☒
1.1 TITLE	1.2 NAME	1.3 STREET ADDRESS	1.4 CITY - ST - ZIP	Change	Addition
FSD	Jan Wolfe	917 Briarwood Drive West Palm Bch FL 33417		☒	☐
6.1 TITLE	6.2 NAME	6.3 STREET ADDRESS	6.4 CITY - ST - ZIP	Change	Addition
	Richard Kolnken	12591 Shoreside Lane Wellington, F1 33414		☐	☐

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(k), 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 017, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DATE

TELEPHONE

19 Jan 95 687-3754