FILED

163-675-4063

2001 UNIFORM BUSINESS REPORT (UBR)

SIGNATURE:

Feb 03, 2001 8:00 am Secretary of State **DOCUMENT # 770767** 1. Entity Name CHRIST THE KING LUTHERAN CHURCH OF LABELLE, INC. 02-03-2001 90018 006 ****61.25 Principal Place of Business Mailing Address P.O. BOX 2925 1362 THIGPEN RD. LA BELLE FL 33935 LABELLE FL 33935 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 59-2363738 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) KARAU, MEL 1750 FT-DONALD RD **ALVA FL 33920** City Zip Code FL 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. DATE (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing FILE NOW: Make Check Payable to \$5.00 May Be Trust Fund Contribution. Added to Fees FEE IS \$61.25 **Department of State** 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 11. CR2E037 (10/00) TITLE **Delete** TITLE Joel Nelson CLAUSEN, BILL NAME NAME 2690 Case Rd STREET ADDRESS 1205 C.R. 830 STREET ADDRESS LaBelle,Fl.33935 CITY-ST-ZIP CITY-ST-ZIP FELDA FL 33930 SD SD Delete TITLE TITLE Mel Karau PEREZ, LYNN NAME 1790 Ft Denaud Rd STREET ADDRESS STREET ADDRESS 2745 CASE RD., LABELLE FL Alva, Fl, 33920 CITY-ST-ZIP CITY-ST-ZIP LABELLE FL VD John Basel VD. TITLE TITLE 200 Hickpoochee-C-30 MEAD, TOM NAME NAME LaBelle, FL 33935 STREET ADDRESS STREET ADDRESS POB 2109, 1200 TAMPA AVE CITY-ST-ZIP CITY-ST-ZIP D LABELLE FL Kevin Lutkenhaus TITLE 230 Davis St THOMSON, JOHN NAME NAMÉ LaBelle, FL 33935 STREET ADDRESS 220 PARK AVENUE STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP LABELLE FL Olga Jedrykowski TITLE Delete TITLE 5680 CR78A NAME HENRICKSON, NANCY NAME LaBelle, FL 33935 STREET ADDRESS STREET ADDRESS 769 FT THOMPSON RD CITY-ST-ZIP CITY-ST-ZIP LABELLE FL 33935 Susan Conley Ft-Denaud Rd 4145 Ft. Denaud Rd. TITLE ☐ Delete TITLE LaBelle, FL 33935 NAMÉ NAME STREET ADDRESS D STREET ADDRESS Phil Gay CITY-ST-ZIP CITY-ST-ZIP 18725 WSR78 12. I hereby certify that the information supplied with this filing does not qualify for the exemption standicated on this report or supplemental report is true and accurate and that my signature shall hereby certified the control of the control Moore Haven, FL 33471 of the corporation or the receiver or trustee empowered to execute this report as changed, or on an attachment with an address, with all other like empowered.