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Feb 12 1997 8:00am  
Secretary of StateNONPROFIT  
CORPORATION  
ANNUAL REPORT  
1997FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # N00149 (7)

1. Corporation Name

ST. MARK'S LUTHERAN CHURCH OF HOLLYWOOD, FLORIDA  
, INC.

Principal Place of Business

Mailing Address

% ROGER L. WALKER  
502 N. 28TH AVE.  
HOLLYWOOD FL 33020% ROGER L. WALKER  
502 N. 28TH AVE.  
HOLLYWOOD FL 33020-38113. Date Incorporated or Qualified  
12/02/19833a. Date of Last Report  
03/06/1996

4. FEI Number

59-0879962

Applied For

Not Applicable

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc

26 Suite, Apt. #, etc.

22 City &amp; State

27 City &amp; State

23 Zip

Country

28 Zip

Country

24

25

29

30

5. Certificate of Status Desired

☐\$8.75 Additional  
Fee Required6. Election Campaign Financing  
Trust Fund Contribution☐\$5.00 May Be  
Added to Fees8. This corporation has liability for intangible tax under s. 199.032,  
Florida Statutes☐ Yes☒ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

VEHLING JAMES J. (REV.)  
502 N. 28TH AVE.  
HOLLYWOOD FL 33020

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 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

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

(NOTE: Registered Agent Signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE PD ☐ DELETE  
NAME WEIGAND, RON  
STREET ADDRESS 2380 SW 70 TERR  
CITY-ST-ZIP DAVE FLTITLE VD ☐ DELETE  
NAME LARSEN, KURT  
STREET ADDRESS 5810 SW 36 TERR.  
CITY-ST-ZIP FT LAUDERDALE FLTITLE SD ☒ DELETE  
NAME HOFMAN, JUDY  
STREET ADDRESS 5917 SW 37 AVE.  
CITY-ST-ZIP FT LAUDERDALE FLTITLE T ☐ DELETE  
NAME GOTTLIEB, KAREN  
STREET ADDRESS 2730 NE 183RD ST., TH#2  
CITY-ST-ZIP N MIAMI BCH. FLTITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIPTITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP1.1 TITLE ☐ Change ☐ Addition  
1.2 NAME  
1.3 STREET ADDRESS  
1.4 CITY-ST-ZIP2.1 TITLE ☐ Change ☐ Addition  
2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY-ST-ZIP3.1 TITLE SD ☐ Change ☒ Addition  
3.2 NAME Reese, DREW  
3.3 STREET ADDRESS 3950 SW 46 COURT  
3.4 CITY-ST-ZIP FT. LAUDERDALE FL 333124.1 TITLE T ☐ Change ☐ Addition  
4.2 NAME GOTTLIEB, KAREN  
4.3 STREET ADDRESS 772 NE 72 TERR  
4.4 CITY-ST-ZIP MIAMI FL 331385.1 TITLE V ☐ Change ☒ Addition  
5.2 NAME JONES, CAROL  
5.3 STREET ADDRESS 249 NW 104 TERR  
5.4 CITY-ST-ZIP Hollywood FL 330236.1 TITLE  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP

14. I do 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.

SIGNATURE: Karen Gottlieb KAREN GOTTLIEB

1-18-97

305-687-8383

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone # 0021359

CR2E037 (9/96)