

FILE NOW: FILING FEE IS \$61.25

NONPROFIT  
CORPORATION  
ANNUAL REPORT  
1996



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

DOCUMENT # N08339 (6)

1. Corporation Name

GOOD SHEPHERD LUTHERAN CHURCH, HERNANDO, INC.

Principal Place of Business

Mailing Address

439 E NORVELL BRYANT HWY  
HERNANDO FL 32642

34442

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HERNANDO FL 32642

34442



|                                |                        |
|--------------------------------|------------------------|
| 2. Principal Place of Business | 2a. Mailing Address    |
| 21 Suite, Apt. #, etc.         | 26 Suite, Apt. #, etc. |
| 22 City & State                | 27 City & State        |
| 23 Zip                         | 28 Zip                 |
| 24 Country                     | 29 Country             |
| 25                             | 30                     |

|   |                                       |
|---|---------------------------------------|
| 3. Date Incorporated or Qualified<br>03/25/1985   | 3a. Date of Last Report<br>02/14/1995 |
| 4. FEI Number<br>59-2441028   | Applied For<br>Not Applicable         |
| 5. Certificate of Status Desired <input type="checkbox"/>   | \$8.75 Additional<br>Fee Required     |
| 6. Election Campaign Financing<br>Trust Fund Contribution <input type="checkbox"/>  | \$5.00 May Be<br>Added to Fees        |
| 8. This corporation has liability for intangible tax under s. 199.032,<br>Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No |                                       |

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

FALK, EUGENE  
2156 E. NEW HAVEN  
INVERNESS FL 34453

81 Name  
Roy Wernlund  
82 Street Address (P.O. Box Number is Not Acceptable)  
4368 W. Pansy Ln. Beverly Hills, FL.  
83  
84 City  
800001733718  
-03/06/96--01027-FL-18 34465

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]*  
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when renewing) DATE

| 12. OFFICERS AND DIRECTORS |                     | 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 |   |
|----------------------------|---------------------|---|---|
| TITLE                      | VD                  | 1.1 TITLE   | Pres.-Dir.                              |
| NAME                       | WERNLAND, ROY       | 1.2 NAME  | Roy Wernland                            |
| STREET ADDRESS             | 4368 W. PANSY LN    | 1.3 STREET ADDRESS                                    |   |
| CITY-ST-ZIP                | BEVERLY HILLS FL    | 1.4 CITY-ST-ZIP                                       | 4368 W. Pansy Ln. Beverly Hills FL      |
| TITLE                      | SD                  | 2.1 TITLE   | V. Pres.-Dir.                           |
| NAME                       | HEIKKINEN, JUDY     | 2.2 NAME  |   |
| STREET ADDRESS             | 3130 S CYGNET       | 2.3 STREET ADDRESS                                    | Gerri Fallanca                          |
| CITY-ST-ZIP                | INVERNESS FL        | 2.4 CITY-ST-ZIP                                       | 770 E. Morningstar Ln. Hernando, FL     |
| TITLE                      | TD                  | 3.1 TITLE   | Sect.-Dir.                              |
| NAME                       | HENDEE, BLANCHE     | 3.2 NAME  |   |
| STREET ADDRESS             | 3081 N. CAMOMILE PT | 3.3 STREET ADDRESS                                    | Marian Langlois                         |
| CITY-ST-ZIP                | BEVERLY HILLS FL    | 3.4 CITY-ST-ZIP                                       | 23 S.J. Kellner Blvd. Beverly Hills FL. |
| TITLE                      | PD                  | 4.1 TITLE   | Treas.-Trustee                          |
| NAME                       | FALK, EUGENE        | 4.2 NAME  | Dick Middlesworth                       |
| STREET ADDRESS             | 2156 E NEW HAVEN    | 4.3 STREET ADDRESS                                    |   |
| CITY-ST-ZIP                | INVERNESS FL        | 4.4 CITY-ST-ZIP                                       | 1241 W. Stafford St. Hernando, FL.      |
| TITLE                      |                     | 5.1 TITLE   | Trustee                                 |
| NAME                       |                     | 5.2 NAME  | Clyde Lindstrom                         |
| STREET ADDRESS             |                     | 5.3 STREET ADDRESS                                    |   |
| CITY-ST-ZIP                |                     | 5.4 CITY-ST-ZIP                                       | 662 E. Buckingham Dr., Lecanto, 34461   |
| TITLE                      |                     | 6.1 TITLE   | Trustee                                 |
| NAME                       |                     | 6.2 NAME  | Bill Graham                             |
| STREET ADDRESS             |                     | 6.3 STREET ADDRESS                                    |   |
| CITY-ST-ZIP                |                     | 6.4 CITY-ST-ZIP                                       | 4160 N. Indianhead Rd., Hernando 34442  |

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 119.07(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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *[Signature]* Dick Middlesworth 1/22/1996 352-746-3077  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date

CR2E037 (12/95)