FILE NOW: FILING FEE AFTER MAY 1 IS $155.00

CORPORATION ANNUAL REPORT **1995**

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

APPROVED AND FILED

95 FEB -9 AM 8:46

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # N13811 (7)

1. Corporation Name

OUR SAVIOR LUTHERAN CHURCH OF ZEPHYRHILLS, INC.

Principal Place of Business	Mailing Address
5625 21ST STREET ZEPHYRHILLS FL 33540	5625 21ST STREET ZEPHYRHILLS FL 33540

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 03/12/1986
3a. Date of Last Report: 02/04/1994
4. FEI Number: 59-1116489 ☐ 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	26
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23	City & State 28
Zip 24 / Country 25	Zip 29 / Country 30

9. Name and Address of Current Registered Agent

SPRINGER, NORMAN R.
5621 BEECH STREET
ZEPHYRHILLS FL 33540

10. Name and Address of New Registered Agent

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: Norman R. Springer President 1-12-95
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	1.1 TITLE	President/PD	XX Change ☐ Addition
NAME	BURNISON, RAY	1.2 NAME	Bostrom, Arnold	
STREET ADDRESS	5431 BETMAR DR.	1.3 STREET ADDRESS	4556 Blossom Blvd	
CITY-ST-ZIP	ZEPHYRHILLS FL	1.4 CITY-ST-ZIP	Zephyrhills, FL 33541	
TITLE	VD	2.1 TITLE	Vice President/VD	XX Change ☐ Addition
NAME	BOSTROM, ARNOLD	2.2 NAME	Herman Wagner,	
STREET ADDRESS	4556 BLOSSOM BLVD	2.3 STREET ADDRESS	3153 Lotus Blossom Dr	
CITY-ST-ZIP	ZEPHYRHILLS FL	2.4 CITY-ST-ZIP	Zephyrhills, Fl 33541	
TITLE	S	3.1 TITLE	Secretary/S	XX Change ☐ Addition
NAME	MARTIN, MARGARET	3.2 NAME	Gertie Schultz	
STREET ADDRESS	39501 DUNDEE RD	3.3 STREET ADDRESS	33608 Arthur Dr	
CITY-ST-ZIP	ZEPHYRHILLS FL	3.4 CITY-ST-ZIP	Zephyrhills, FL 33543	
TITLE	T	4.1 TITLE	Treasurer/T	☐ Change ☐ Addition
NAME	KRIPPS, BASIL	4.2 NAME	Basil Kripps	
STREET ADDRESS	5337 23RD ST.	4.3 STREET ADDRESS	5337 23rd St	
CITY-ST-ZIP	ZEPHYRHILLS FL	4.4 CITY-ST-ZIP	Zephyrhills, FL 33540	
TITLE	TD	5.1 TITLE	Head Trustee/TD	XX Change ☐ Addition
NAME	STEUBER, OSCAR	5.2 NAME	Dennis Giese	
STREET ADDRESS	5207 8TH STREET	5.3 STREET ADDRESS	37305 Northside Dr	
CITY-ST-ZIP	ZEPHYRHILLS FL	5.4 CITY-ST-ZIP	Zephyrhills, FL 33541	
TITLE	DS	6.1 TITLE	Financial Secretary/DS	XX Change ☐ Addition
NAME	GAFFIELD, RUTH	6.2 NAME	Ruth Gaffield	
STREET ADDRESS	6933 SYLVAN LANE	6.3 STREET ADDRESS	6933 Sylvan Lane	
CITY-ST-ZIP	ZEPHYRHILLS FL	6.4 CITY-ST-ZIP	Zephyrhills FL 33541	

If Deposited by Bank

2/9/95 JHB

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)(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: Norman R. Springer President 1-12-95 (813) 788-6007
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

0082348