FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

FILED

Jan 21 1998 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1998

Principal Place of Business

STREET ADDRESS

DOCUMENT # N38914

(0)

Mailing Address

ST. PETER'S EVANGELICAL LUTHERAN CHURCH OF MIAMI

4431 SW 104 CT.		4431 SW 104 CT.			3. Date Incorporated or Qualified
MIAMI FL 33025X. US		MIAMIFL"33¥3\$.⊠ US			06/29/1990
03		03			4. FEI Number Applied For
			,		05-0032978 Not Applicable
2. Principal Place of Business 2a. Mailing Address					5. Certificate of Status Desired S8.75 Additional
21		26			Fee Required
Suite, Apt	. #, etc.	Suite, Apt. #, etc.			6. Election Campaign Financing \$5.00 May Be
22		27			Trust Fund Contribution
City & State		City & State			Z is this nonprofit corporation a homeowners association?
23		28			Yes No
^{Zip} 33165 ^{Country}		☐ Zip 33165 ☐ Country			8. This corporation owes or has paid the current year Intangible
24 25		[29] [30]			Personal Property Tax due June 30. 🔲 Yes 🔲 No
9. Name and Address of Current Registered Agent					10. Name and Address of New Registered Agent
į			81	Name	
DEWITT, RICHARD J			82	Street	Address (P.O. Box Number is Not Acceptable)
1113 CASTILE AVENUE					
CORAL GABLES FL 33134			83		
1			84	City	85 Zip Code
			1 1		FL ` `
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.					
οπισε 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 rehestating) QATE					
12.	OFFICERS AND	S2010	13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	P	DELETE	1.1 TITLE	Į	☐ Change ☐ Addition
NAME	PINZON, SAMUEL		1.2 NAME		
STREET ADDRESS	4431 SW 104 CT		1.3 STREET ADD		
CITY-ST-ZIP	MIAMI FL		1.4 CITY-ST-ZIP		
TITLE	VD	DELETE	2.1 TIYLE		Change Addition
NAME	GILBERTO, CASTILLA	! :	2.2 NAME		
STREET ADDRESS	8836 SW 72 ST M-272	836 SW 72 ST M-272		ADDRESS	
City-St-Zip			2. 4 CITY-ST-ZIP		,
TITLE	SD	DELETE	3,1 TITLE		Change Addition
NAME	EDUARDO, MUHINA	1:	3.2 NAME	- 1	
STREET ADDRESS	6631 SW 2ND ST		3.3 STREET	ADDRESS	
CITY-ST-ZIP	MIAMI FL	1:	3.4. CITY-S	T-ZIP	
TITLE	TD		4.1 TITLE		Change Addition
NAME	JOSE, COMAS	₹.	4. 2 NAME	ŀ	
STREET ADDRESS	10854 SW 88 ST APT 409	1 .	4.3 STREET	ADDRESS	
CITY-ST-ZIP	MIAMI FL		4.4 CITY - ST		
TITLE	1970		5.1 TITLE		Change Addition
NAME		_	5.2 NAME)	
STREET ADDRESS		i	5.3 STREET	ADDRESS !	
		1		1	
CITY-ST-ZIP TITLE			5.4 C/TY - ST 5.1 TITLE	- 211"	Change Addition
MANTE			OLI HILLE SONAME		Onenge Addition

6.3 STREET ADDRESS

Director/Pastor

filing does not quality for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information all report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an an accurate empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in

01-06-98