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**NONPROFIT CORPORATION ANNUAL REPORT** 



FLORIDA DEPARTMENT OF STATE

Sandra B. Mörtham

Secretary of State **DIVISION OF CORPORATIONS** 

1998

(5)

FILED
May 19 1998 8:00am
Secretary of State

WOOD	DLANDS LUTHERAN MINI	STRIES, INC.							
Principal Plac	e of Business	Mailing Address				ı indisini dir asası alanı sılını a	III III III TIIII WIRII WII	AII AIDLI OIAII O	1811 91811 1991
15749 HIGHWA	Y <b>45</b> 5	15749 HIGHWAY 455			<u> </u>	3. Date Incorporated or Qualifie	od	······································	
MONTVERDE F	FL <b>34</b> 756	MONTVERDE FL 34756				07/19/1991			
					ľ	4. FEI Number		Aı	oplied For
						59-3120417		No	ot Applicable
21	lace of Business	28. Mailing Address 26	<del> </del>			5. Certificate of Status Desired			Additional equired
Suite, Apt.	#, etc.	Suite, Apt. #, etc.				6. Election Campaign Financing		\$5.00	
City & State		City & State			-	Trust Fund Contribution		Added to	· · · · · · · · · · · · · · · · · · ·
23	<u>*</u>	28				7. Is this nonprofit corporation a		S ASSOCIATIO	(If
Zip	Country	Zip	Cor	untry		8. This corporation owes or has	paid the cur	rent year Ini	angible
24	25	29	30			Personal Property Tax due Ju	ine 30. 🛚 📘	Yes [	] No
	9. Name and Address of Cur	rent Registered Agent		]		10. Name and Address of New	Registered .	Agent	
				81 Name	Re	u. Paul von W	arder	•	
	r, <b>re</b> v. dr. Brian			82 Street	Address	s (P.O. Box Number is Not Accer			
15749 C				00	(5	149 CR455			
M6NTV	ERDE FL 34758			83					
•				84 City	и.	ntverde	C* 1		Code
11 Pureupol	to the provisions of Sections 617 (	0502 and 617 1508 Florida Statut	oe the a	hove-pamed			FL.	chenging i	-756
office or r	egistered agent, or both in the St	0502 and 617.1508, Florida Statut late of Florida. Such change was a bligations of, Section 617.0503, Flo	authorize	d by the corp	poration	's board of directors. I hereby ac	cept the app	ointment as	registered
ł	m tamiliar with, and accept the of	sligations of, Section 617,0503, Fit	orida Sta	itutes.					
SIGNATURE .	Signature, typed or printed name of registered	I agent and title if applicable. (NOT	E: Registere	ed Agent signature	required v	when reinstating)	DATE		-
12.	OFFICERS	AND DIRECTORS	13.	······································		ADDITIONS/CHANGES TO OF	FICERS AND	DIRECTOR	IS IN 12
TITLE	D	☐ DELETE	1.1 T	ITLE		- 14		Change	■ Addition
NAME	Teder, rein		1.2 N	IAME					
STREET ADDRESS	410 ORLANDO AVE #5A		1.3 \$	TREET ADDRESS					
CITY-ST-ZIP	OCOEE FL		_	CITY-ST-ZIP	l				
TITLE	D	☐ DELETE	2.1 11	171 F				A	
NAME	MICHELS, ROBERT							Change	☐ Addition
STREET ADDRESS	23 APPLE HILL HOLLOW		2.2 N	IAME				Change	☐ Addition
CITY-ST-ZIP	OACCE DEPOY FI		2.3 \$	iame Street address				Change	∐ Addition
NAME	CASSELBERRY FL	T nei ete	2.3 S	IAME STREET ADDRESS CITY-ST-ZIP					
NAME	D	☐ DELETE	2.3 S 2. 4 C 3.1 Ti	IAME STREET ADDRESS CITY-ST-ZIP				Change	Addition
STREET ANDRESS	D Parker, Cindi	☐ DELETE	2.3 S 2. 4 C 3.1 T 3.2 N	TAME STREET ADDRESS CITY-ST-ZIP TITLE JAME					
STREET ADDRESS	D Parker, Cindi 309 Cherokee Dr	☐ DELETE	2.3 S 2.4 C 3.1 Ti 3.2 N 3.3 S	IAME STREET ADDRESS CITY-ST-ZIP STREE IAME STREET ADDRESS					
STREET ADORESS  CITY-ST-ZIP  TITLE	D PARKER, CINDI 309 CHEROKEE DR ORLANDO FL	☐ DELETE	2.3 S 2.4 C 3.1 Ti 3.2 N 3.3 S	AME STREET ADDRESS CITY-ST-ZIP TILE HAME STREET ADDRESS CITY-ST-ZIP					
CITY-ST-ZIP TITLE	D PARKER, CINDI 309 CHEROKEE DR ORLANDO FL D		2.3 S 2.4 G 3.1 Ti 3.2 N 3.3 S 3.4 G 4.1 Ti	TAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	- Franks v			☐ Change	Addition
CITY-ST-ZIP TITLE NAME	D PARKER, CINDI 309 CHEROKEE DR ORLANDO FL D FREDRICKS, JOHN		2.3 S 2.4 C 3.1 TH 3.2 N 3.3 S 3.4 C 4.1 TH 4.2 N	AME STREET ADDRESS CITY-ST-ZIP TILE HAME STREET ADDRESS CITY-ST-ZIP				☐ Change	Addition
CITY-ST-ZIP TITLE NAME STREET ADDRESS	D PARKER, CINDI 309 CHEROKEE DR ORLANDO FL D FREDRICKS, JOHN 325 W. MAIN ST.	☐ DELETE	2.3 S 2. 4 C 3.1 TH 3.2 N 3.3 S 3.4 C 4.1 TH 4. 2 N 4.3 S	JAME STREET ADDRESS CITY-ST-ZIP STREET ADDRESS STREET ADDRESS CITY-ST-ZIP STREET ADDRESS CITY-ST-ZIP STREET ADDRESS				☐ Change	Addition
CITY-ST-ZIP TITLE NAME	D PARKER, CINDI 309 CHEROKEE DR ORLANDO FL D FREDRICKS, JOHN		2.3 S 2. 4 C 3.1 TH 3.2 N 3.3 S 3.4 C 4.1 TH 4. 2 N 4.3 S	LAME STREET ADDRESS CITY-ST-ZIP STREET ADDRESS CITY-ST-ZIP STREET ADDRESS CITY-ST-ZIP STREET ADDRESS STREET ADDRESS STREET ADDRESS	C			☐ Change	Addition  Addition
CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	D PARKER, CINDI 309 CHEROKEE DR ORLANDO FL D FREDRICKS, JOHN 325 W. MAIN ST. APOPKA FL	☐ DELETE	23 S 2.4 C 3.1 Tl 3.2 N 3.3 S 3.4 C 4.1 Tl 4.2 N 4.3 S 4.4 C	LAME STREET ADDRESS CITY_ST-ZIP ITLE LAME STREET ADDRESS CITY_ST-ZIP ITLE NAME STREET ADDRESS CITY_ST-ZIP ITLE NAME STREET ADDRESS CITY_ST-ZIP ITLE	C.	MAK FLAIG	= 400	☐ Change	Addition  Addition
CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	D PARKER, CINDI 309 CHEROKEE DR ORLANDO FL D FREDRICKS, JOHN 325 W. MAIN ST. APOPKA FL D	☐ DELETE	23 S' 2.40 3.1 Ti 32 N 3.3 S' 34.0 4.1 Ti 4.2 N 4.3 S' 4.4 CI 5.1 Ti 5.2 N.	LAME STREET ADDRESS CITY_ST-ZIP ITLE JAME STREET ADDRESS CITY_ST-ZIP ITLE NAME STREET ADDRESS CITY_ST-ZIP ITLE VAME STREET ADDRESS CITY_ST-ZIP ITLE	e.	MAX FLAIG 3683 IDLE	= HOU	☐ Change	Addition  Addition
CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	D PARKER, CINDI 309 CHEROKEE DR ORLANDO FL D FREDRICKS, JOHN \$25 W. MAIN ST. APOPKA FL D HANSEN, RAYMOND L.	□ DELETE  DELETE  5	23 S' 2.40 3.1 Ti 3.2 N. 3.3 S' 3.4.0 4.1 Ti 4.2 N. 4.3 S' 4.4 Ci 5.1 Ti 5.2 N. 5.3 S'	LAME STREET ADDRESS CITY-ST-ZIP ITLE JAME STREET ADDRESS CITY-ST-ZIP ITLE NAME STREET ADDRESS CITY-ST-ZIP UTLE JAME STREET ADDRESS CITY-ST-ZIP UTLE JAME JAME JAME JAME JAME	c.	MAX FLAIG 3683 IDLE ORLANDO,	= HOU	☐ Change ☐ Change ☐ Change	Addition  Addition  Addition
CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	D PARKER, CINDI 309 CHEROKEE DR ORLANDO FL D FREDRICKS, JOHN 325 W. MAIN ST. APOPKA FL D HANSEN, RAYMOND L. 15749 COUNTY ROAD 459	☐ DELETE	23 S' 2.40 3.1 Ti 3.2 N. 3.3 S' 3.4.0 4.1 Ti 4.2 N. 4.3 S' 4.4 Ci 5.1 Ti 5.2 N. 5.3 S'	LAME STREET ADDRESS CITY-ST-ZIP TITLE STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE LAME STREET ADDRESS CITY-ST-ZIP TITLE LAME STREET ADDRESS CITY-ST-ZIP	C		FL.	Change  Change  Change	Addition  Addition  Addition  Addition
CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	D PARKER, CINDI 309 CHEROKEE DR ORLANDO FL D FREDRICKS, JOHN 325 W. MAIN ST. APOPKA FL D HANSEN, RAYMOND L. 15749 COUNTY ROAD 451	□ DELETE  DELETE  5	23 S' 2. 40 3.1 Ti 3.2 N. 3.3 S' 3.4 .C 4.1 Ti 4.2 N. 4.3 S' 4.4 Ci 5.1 Ti 5.2 N. 5.3 S' 5.4 Ci 5. Ci 5.4 Ci 5. Ci 5.4 Ci 5. Ci 5.4 Ci	LAME STREET ADDRESS CITY-ST-ZIP (TILE STREET ADDRESS CITY-ST-ZIP UTLE NAME STREET ADDRESS CITY-ST-ZIP UTLE LIAME STREET ADDRESS CITY-ST-ZIP UTLE LIAME STREET ADDRESS CITY-ST-ZIP UTLE LIAME STREET ADDRESS CITY-ST-ZIP UTLE		ORLANDO,	FL.	Change  Change  Change	Addition  Addition  Addition
CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE TITLE THE TADDRESS THE TADDRESS	D PARKER, CINDI 309 CHEROKEE DR ORLANDO FL D FREDRICKS, JOHN 325 W. MAIN ST. APOPKA FL D HANSEN, RAYMOND L. 15749 COUNTY ROAD 454 MONTVERDE FL	□ DELETE  DELETE  5	23 S' 2.4 C 3.1 TI 3.2 N 3.3 S 3.4 .C 4.1 TI 4.2 N 4.3 S' 4.4 C 5.1 TI 5.2 N 5.3 S' 5.4 C 6.1 TI 6.2 N	LAME STREET ADDRESS CITY-ST-ZIP (TILE STREET ADDRESS CITY-ST-ZIP UTLE NAME STREET ADDRESS CITY-ST-ZIP UTLE LIAME STREET ADDRESS CITY-ST-ZIP UTLE LIAME STREET ADDRESS CITY-ST-ZIP UTLE LIAME STREET ADDRESS CITY-ST-ZIP UTLE			FL.	☐ Change ☐ Change ☐ Change ☐ Change ☐ Change	Addition  Addition  Addition  Addition

14. I hereby certify that the information supplied with this fluing bloes not qualify to the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplementel annual report is true and experience 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 the secure 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 attaniment with an address.