

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # **N46484** (4)

1. Corporation Name

**GRACE LUTHERAN CHURCH OF PORT ST. LUCIE, FLORIDA
. INC.**

Principal Place of Business

Mailing Address

**718 SW PORT ST LUCIE BOULEVARD
PORT ST LUCIE FL 34953
US**

**718 SW PT. ST. LUCIE BLVD.
PORT ST LUCIE FL 34953
US**



3. Date Incorporated or Qualified
12/17/1991

3a. Date of Last Report
05/01/1995

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

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25

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4. FEI Number

65-0315662

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**

8. 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

**RICHEY, FRED
6704 DONLON BLVD.
FORT PIERCE FL 34951**

81 Name **Kevin L. Garbers**

82 Street Address (P.O. Box Number is Not Acceptable)
7205 Arthurs Road

83

84 City **Ft. Pierce**

FL

85 Zip Code
34951

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 *Kevin L. Garbers*

Kevin L. Garbers 2/1/96

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 **D** ☒ DELETE

NAME **RICHEY, FRED**
STREET ADDRESS **6704 DONLON BLVD.**
CITY-ST-ZIP **FORT PIERCE FL**

TITLE **D** ☒ DELETE

NAME **MUNDINGER, ORRIE**
STREET ADDRESS **1744 SE ELKHART TERRACE**
CITY-ST-ZIP **PORT ST. LUCIE FL**

TITLE **D** ☒ DELETE

NAME **HOFFMAN, CAROL**
STREET ADDRESS **1427 SE GRAPELAND AVE**
CITY-ST-ZIP **PORT ST. LUCIE FL**

TITLE **D** ☒ DELETE

NAME **BAILEY, MELISSA**
STREET ADDRESS **1162 SW BELLEVUE AVE**
CITY-ST-ZIP **PORT ST. LUCIE FL**

TITLE **D** ☒ DELETE

NAME **MUNDINGER, ETHEL**
STREET ADDRESS **1744 SE ELKHART TERR**
CITY-ST-ZIP **PORT ST LUCIE FL**

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

P

Kevin L. Garbers
7205 Arthurs Rd.

Ft. Pierce, FL 34951

VP

Daryl Schlamp
2961 Morningside
Port St. Lucie, FL 34952

T

Cheryl Ingalls
2190 SE Carnation RD
Pt. St. Lucie, FL 34952

D

Paul Heyer
4422 SW Dacmon
Pt. St. Lucie, FL 34953

D

Amy McKnight
2386 SW LeJune St.
Pt. St. Lucie, FL 34953

D

Charles Powell
1913 Royal Palm Dr.
Ft. Pierce, FL 34982

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: *Kevin L. Garbers* **Kevin L. Garbers**

2/1/96

407-468-5321

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (12/95)