


**2007 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jan 31, 2007 08:00 AM
Secretary of State

DOCUMENT # N51317		
1. Entity Name CHRIST LUTHERAN CHURCH OF BROOKSVILLE, FLORIDA, INC.		
Principal Place of Business 475 NORTH AVE. WEST BROOKSVILLE, FL 34601	Mailing Address 475 NORTH AVE. WEST BROOKSVILLE, FL 34601	



01162007 No Chg-NP CR2E037 (4/06)

DO NOT WRITE IN THIS SPACE

4. FEI Number 23-7046292	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent KORN, WILLIAM J JR. 10235 TRUDY LYNN DR BROOKSVILLE, FL 34601
--

**DO NOT WRITE
IN THIS SPACE**

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

**Filing Fee is \$61.25
Due by May 1, 2007**

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00** May Be
Added to Fees

U00000614212
02/06/07-80015-025 61.25

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P REIGN, FREEMAN V 910 HAMMOCK R D BROOKSVILLE, FL 34601
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V KORN, WILLIAM J JR 10235 TRUDY LYNN DR BROOKSVILLE, FL 34601
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T HUNTWORK, CAROL E 5 SCHIZANTHUS CT HOMOSASSA, FL 34446
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD DUNSTAN, BETTY 9091 DICKENS AVE BROOKSVILLE, FL 34613
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Carol E. Huntwork Carol E. Huntwork 1/18/07 352-796-8331
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #