

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1996



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

1-2

DOCUMENT # N93000000402 (8)

1. Corporation Name

LORD OF LIFE MISSION CHURCH, INC.

MISSION

Principal Place of Business

Mailing Address

1200 DELTONA PLAZA
STE 12 AND 13
DELTONA FL 32725
US

1109 CAMBRIDGE
DELTONA FL 32725
US



3. Date Incorporated or Qualified
01/25/1993

3a. Date of Last Report
06/22/1995

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

24

25

29

30

4. FEI Number
59-3228554

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

SYLVESTER, CHESTER
1109 CAMBRIDGE
DELTONA FL 32725

81 Name

H. Renee Finegan

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

1109 Cambridge St.

83

84 City

Deltona

FL

85 Zip Code

32725

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

H. Renee Finegan

(NOTE: Registered Agent signature required when reinstating)

DATE

4/20/96

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	D	<input checked="" type="checkbox"/> DELETE
NAME	SYLVESTER, CHESTER	
STREET ADDRESS	2131 SWANSON DRIVE	
CITY-ST-ZIP	DELTONA FL 32738	
TITLE	D	<input checked="" type="checkbox"/> DELETE
NAME	SYLVESTER, CARMELA K	
STREET ADDRESS	2131 SWANSON DRIVE	
CITY-ST-ZIP	DELTONA FL 32738	
TITLE	D	<input type="checkbox"/> DELETE
NAME	FINEGAN, RENEE	
STREET ADDRESS	1109 CAMBRIDGE STREET	
CITY-ST-ZIP	DELTONA FL 32725	
TITLE	D	<input type="checkbox"/> DELETE
NAME	KAHL, OVENIA	
STREET ADDRESS	519 Bead Circle	
CITY-ST-ZIP	DELTONA, FL 32738	
TITLE	D	<input type="checkbox"/> DELETE
NAME	Mrs. Farland, Diane	
STREET ADDRESS	2101 Nedra Ave	
CITY-ST-ZIP	DELTONA, FL 32725	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

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***61.25

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:

H. Renee Finegan

4/20/96

904-789-8058

CR2E037 (12/95)

N93000000402

2-2

May 17, 1996

Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Re: Document #N93000000402(8)

To Whom It May Concern;

Due to cash flow, we are not in the position to change our incorporated name from Lord of Life Mission Church, Inc. to Lord of Life Lutheran Church, Inc. Therefore, we do not wish to complete the amendment form you provided at this time.

Please keep our incorporated name on the records as it is until such time that we can afford to make a change. Every penny we save now is going toward our building fund.

Sincerely,


H. Renee Finegan,

President of Congregation