

FILE NOW: FILING FEE IS \$61.25

FILED
Feb 22, 1999 8:00 am
Secretary of State

02-22-1999 90011 035 ****70.00

0018220

**NONPROFIT
CORPORATION
ANNUAL REPORT
1999**



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N94000001869

1. Corporation Name

**LUTHERAN EDUCATION ASSOCIATION OF CENTRAL FLORID
A, INC.**

Principal Place of Business
**550 N ECONLOCKHATCHEE TR
ORLANDO FL 32825**

Mailing Address
**550 N ECONLOCKHATCHEE TR
ORLANDO FL 32825**



2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified	
21 Suite, Apt. #, etc.		26 Suite, Apt. #, etc.		04/15/1994	
22 City & State		27 City & State		4. FEI Number	
23 Zip		28 Zip		59-3236110	
25 Country		30 Country		Applied For	
				Not Applicable	
				5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required	
				6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	

9. Name and Address of Current Registered Agent

**OGG, SANDRA L
4704 JAMERSON PLACE
ORLANDO FL 32807**

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City
FL 85 Zip Code

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

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	PD <input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	ROSE, LYNN	1.2 NAME	
STREET ADDRESS	3013 HARBOUR LANDING WAY	1.3 STREET ADDRESS	
CITY-ST-ZIP	CASSELBERRY FL 32707	1.4 CITY-ST-ZIP	
TITLE	VPD <input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	STANO, THOMAS	2.2 NAME	
STREET ADDRESS	9018 HAYWOOD COURT	2.3 STREET ADDRESS	
CITY-ST-ZIP	ORLANDO FL 32825	2.4 CITY-ST-ZIP	
TITLE	SD <input checked="" type="checkbox"/> DELETE	3.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	VORPAGEL, RUTH	3.2 NAME	OGG, SANDRA L.
STREET ADDRESS	4631 SHORECREST DRIVE	3.3 STREET ADDRESS	4704 JAMERSON PLACE
CITY-ST-ZIP	ORLANDO FL 32825	3.4 CITY-ST-ZIP	ORLANDO, FLORIDA 32807
TITLE	TD <input checked="" type="checkbox"/> DELETE	4.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	FULLER, PAMELA	4.2 NAME	ABER, KATHY
STREET ADDRESS	1106 SUNWOOD LANE	4.3 STREET ADDRESS	2016 WOODY DRIVE
CITY-ST-ZIP	ORLANDO FL 32825	4.4 CITY-ST-ZIP	WINDERMERE, FLORIDA 34786
TITLE	P <input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	SCHNEIDER, RICHARD W	5.2 NAME	
STREET ADDRESS	814 MCLEAN COURT	5.3 STREET ADDRESS	
CITY-ST-ZIP	ORLANDO FL 32825	5.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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, with all other like empowered.

SIGNATURE: RICHARD W SCHNEIDER

1/4/99

407-275-7750