


FILE NOW: FILING FEE IS \$61.25

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Mar 24 1998 8:00am  
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT <b>1998</b>		FLORIDA DEPARTMENT OF STATE <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS
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**DOCUMENT # N9400002211 (0)**  
1. Corporation Name  
**ST. LUKE EVANGELICAL LUTHERAN CHURCH OF LAKE CITY FLORIDA, INCORPORATED**



Principal Place of Business <b>RTE 21 BOX 469 LAKE CITY FL 32024 US</b>	Mailing Address <b>RTE 21 BOX 469 LAKE CITY FL 32024 US</b>
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3. Date Incorporated or Qualified  
**04/29/1994**

4. FEI Number <b>53-2934165</b>	Applied For <input type="checkbox"/> Not Applicable
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2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip 24 Country	2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip 29 Country
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5. Certificate of Status Desired  **\$8.75 Additional Fee Required**

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

7. Is this nonprofit corporation a homeowners association?  
 Yes  No

8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30.  Yes  No

9. Name and Address of Current Registered Agent  
**HOLTON-FISCHER, DEBORAH E  
RTE 21 BOX 469  
LAKE CITY FL 32024**

10. Name and Address of New Registered Agent

81 Name <b>Paul A. Christenson</b>	
82 Street Address (P.O. Box Number is Not Acceptable) <b>27494 - 41st. Road</b>	
83 City <b>Branford, FL 32008-2411</b>	
84 City <b>FL</b>	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: *Paul A. Christenson* **Paul A. Christenson, President** DATE: \_\_\_\_\_

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>PD PHILLIPS, BRIAN RTE 17 BOX 476 LAKE CITY FL</b>	1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP	<b>PD Paul A. Christenson 27494 - 41st Road Branford, FL 32008-2411</b>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>VPD CHRISTENSON, PAUL 27494 41ST RD BRANFORD FL</b>	2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP	<b>VPD Brian Phillips 1500 Country Club Rd., #31 Lake City, FL 32025</b>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D PEPPER, SHERRY RTE. 9, BOX 752 LAKE CITY FL</b>	3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>TD HART, LINDA RT. 4 BOX 241-F LAKE CITY FL</b>	4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D WAGNER, JOHN RTE 6 BOX 176 LAKE CITY FL</b>	5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D HAMILTON, JAMES RTE 7 BOX 235 LAKE CITY FL</b>	6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 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.

SIGNATURE: *Paul A. Christenson* **Paul A. Christenson** 03/15/98

CR2E037 (10/97)