

# 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

**DOCUMENT # N94000005307 (3)**

1. Corporation Name

**SOUTHERN LUTHERAN ACADEMY FOUNDATION, INC.**



Principal Place of Business

**25712 OAK ALLEY  
LEESBURG FL 34748-8201**

Mailing Address

**25712 OAK ALLEY  
LEESBURG FL 34748-8201**

3. Date incorporated or Qualified  
**10/26/1994**

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

2. Principal Place of Business

**21 25712 OAK ALLEY**

2a. Mailing Address

**26 25712 OAK ALLEY**

4. FEI Number

**59-2351378**

Applied For

Not Applicable

Suite, Apt. #, etc.

**22 LEESBURG, FL**

Suite, Apt. #, etc.

**27 LEESBURG FL**

5. Certificate of Status Desired

☐ **\$8.75 Additional Fee Required**

City & State

**23 34748 USA**

City & State

**28 34748 USA**

6. Election Campaign Financing  
Trust Fund Contribution

☐ **\$5.00 May Be Added to Fees**

Zip

Country

Zip

Country

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

**MEIER, DONALD W  
25712 OAK ALLEY  
LEESBURG FL 34748-8201**

10. Name and Address of New Registered Agent

81 Name

**DONALD W. MEIER**

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

**25712 OAK ALLEY**

83

84 City

**LEESBURG**

**FL**

85 Zip Code

**34748**

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 **REV. DONALD W. MEIER**

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**4-30-96**

12. OFFICERS AND DIRECTORS

TITLE **D** ☐ DELETE  
NAME **KRAUSS, ELMER**  
STREET ADDRESS **P.O. BOX 23943 N/A**  
CITY-ST-ZIP **TAMPA FL 33623**

TITLE **D** ☐ DELETE  
NAME **POPE, JAMES**  
STREET ADDRESS **3102 18TH AVE. WEST**  
CITY-ST-ZIP **BRADENTON FL 34205**

TITLE **D** ☐ DELETE  
NAME **FABER, CRAIG**  
STREET ADDRESS **5011 LIDO STREET**  
CITY-ST-ZIP **ORLANDO FL 32807**

TITLE **D** ☐ DELETE  
NAME **SCHUPPE, CRAIG**  
STREET ADDRESS **2315 COLDSTREAM DRIVE**  
CITY-ST-ZIP **WINTER PARK FL 32792**

TITLE **D** ☐ DELETE  
NAME **SCHUPPE, DON**  
STREET ADDRESS **6448 WYNFREY PLACE**  
CITY-ST-ZIP **MEMPHIS TN 31820**

TITLE **D** ☐ DELETE  
NAME **GAERTNER, DAN**  
STREET ADDRESS **2707 25TH ST. WEST**  
CITY-ST-ZIP **BRADENTON FL 34205**

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN '92

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

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:

**Rev. Donald W. Meier**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**REV. DONALD W. MEIER**

**4-30-96**

Date

**352-728-8492**

Daytime Phone #

CR2E037 (12/95)