FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT



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

1996

DOCUMENT #
1. Corporation Name

STREET ADORESS CITY-ST-ZIP N94000006116 (7)

ST. LUKE THE EVANGELIST CHURCH, INC.

FILED May 01 1996 8:00 am Secretary of State

Principal Place of Business Mailing Address													
	550 NW 40TH COCONUT CR		73		550 NW 40TH STREE OCONUT CREEK FL :								
										3. Date Incorporated or Qualified 12/14/1994	3a. (Date of Last 05/01/1	995
2.	Principal Pla	ice of Busine	ess	2a. Mailing Address					4. FEI Number Applied For				
21	Same			26 Same					65-0541322 Not Applicable				
22	Suite, Apt. #, etc.			27					5. Certificate of Status Desired S8.75 Additional Fee Required				
23	City & State			28						6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees			
	Zip	· · · · · · · · · · · · · · · · · · ·			Zip Country					8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes			
24	5 29 29 9. Name and Address of Current Registered Agent				30				Florida Statutes 10. Name and Address of New I				
		9. Name	and Address of Curr	ent Hegisi	tered Agent		81	Name		TO. Hame and Address of New /	registere	Agent	
HUTCHINSON, KAREN A							82	Street	t Address	(P.O. Box Number is Not Acceptal	ble)		
1500 NW 4TH STREET BOCA RATON FL 33486							83			· · · · · · · · · · · · · · · · · · ·			
1	DOUA N	KION IL V	X7100				84	City				85 Zi	p Code
ı											F	L	
1	I. Pursuant t	o the provisi	ons of Sections 617.05	02 and 61	7.1508, Florida Statut	ove-r	named c	corporation	on submits this statement for the purify directors. Thereby accept the and	irpose of c	hanging its i	registered office	
	familiar wit	ed agent, or h, and acce	ot the obligations of, Se	ction 617.0	0503, Florida Statutes	S.	согр	oration a	s board (of directors. I hereby accept the app	11/-	- 61	
s	IGNATURE _	Karen	A. Hutch	inso	n	OTE: Registere					4130	196	
Signature, typed or printed name of registered agent and title if applicable (NOTE Register 12. OFFICERS AND DIRECTORS 13							it signature	required wr	ADDITIONS/CHANGES TO OF	FICERS AN	ID DIRECTO	ORS IN 12	
	r. TLE	D	OF FIGURE	JI DI ILO	DELETE	1.1			TD				
N.	ME	_	KENNETH			1.2	NAME		Ch	arles E.Goldsmit 16 s. Apress Beni mpano Black Fr	h	#1120	
S	REET ADDRESS		W 72ND AVENUE			13	STREET	ADDRESS	123	16 s. cypress beni	a pr.	,0	
C	TY-ST-ZIP	CORAL	SPRINGS FL 33065			140	CHTY-S	T-ZIP	POI	mpano Bladyth	3500	5/	
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N.	AWE		, LISBETH				NAME						
	REET ADDRESS		W 36TH COURT					ADDRESS	·				
_	TY-ST-ZIP TLE	D	SPRINGS FL 33065		DELETE		GHY-: HTLE	ST-ZIP	+			Change	Addition
	AMF	ERBELDING, JOHN II					NAME						_
1 "	TREET ADDRESS		W 72ND MANOR			3.3	STREET	ADDRESS	3				
t	TY-ST-ZiP		SPRINGS FL 33071			3 4.	CITY-	ST-ZIP					
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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 cath; 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:

Charks E. Goldsmith 4/36/96

**Date **Phone **

**Date **Phone **

**Daytime Phone **

**Daytime Phone **