

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000001223

FILED  
Apr 14, 2009  
Secretary of State

**Entity Name:** REDEMPTION LUTHERAN CHURCH OF PANAMA CITY, FLORIDA, INC.

**Current Principal Place of Business:**

1700 EAST 11TH STREET  
PANAMA CITY, FL 32401

**New Principal Place of Business:**

**Current Mailing Address:**

1700 EAST 11TH STREET  
PANAMA CITY, FL 32401

**New Mailing Address:**

**FEI Number:** 59-1488783

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

BRILL, MICHAEL  
140 COTTONWOOD CIRCLE  
LYNN HAVEN, FL 32444 US

**Name and Address of New Registered Agent:**

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: SD ( ) Delete  
Name: SMITH, BERTHA  
Address: 1002 KIRKLIN AVE.  
City-St-Zip: PANAMA CITY, FL 32401

Title: TD ( ) Delete  
Name: BRILL, MICHAEL  
Address: 140 COTTONWOOD CIR  
City-St-Zip: LYNN HAVEN, FL 32444

Title: PD (X) Delete  
Name: DYER, EDWARD  
Address: 3320 S HARBOUR CIR  
City-St-Zip: PANAMA CITY, FL 32405

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MICHAEL BRILL

TD

04/14/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date