

**2005 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jan 28, 2005 8:00 am
Secretary of State

01-28-2005 90030 048 ****61.25

DOCUMENT # N97000003063	
1. Entity Name THE LUTHER FAMILY FOUNDATION, INC.	



Principal Place of Business 555 HWY A1A VERO BEACH, FL 32963 US	Mailing Address 5070 N HIGHWAY A1A SUITE 200 VERO BEACH, FL 32963
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50007703



01062005 No Chg-NP CR2E037 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number 20-0778969	Applied For Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent MOORE, JOHN E III 5070 N HWY A1A STE 200 VERO BEACH, FL 32963
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8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

**Filing Fee is \$61.25
Due by May 1, 2005**

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

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD LUTHER, JOHN M 555 HWY A1A VERO BEACH, FL 32963
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD LUTHER, NANCY R 555 HWY A1A VERO BEACH, FL 32963
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T LUTHER, LINDSAY Bain, Lindsay L. 555 HWY A1A 7855 Porcupine Creek Road VERO BEACH, FL 32963 Jackson, WY 83001
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AT LUTHER, JENNIFER Langston, Jennifer L. 555 HWY A1A 1606 Charlotte Circle VERO BEACH, FL 32963 Mt. Pleasant, SC 29464
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD LOCKWOOD, KRISTIN L. Lockwood, Kristin L. 555 HWY A1A 108 Wolf Creek Drive North VERO BEACH, FL 32963 Macon, GA 31210
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: John M. Luther, PRESIDENT 01/19/05 772-567-1151
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #