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Apr 22 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # N97000003904 (6)

1. Corporation Name

CHRIST COMMUNITY LUTHERAN SCHOOL, INC.

Principal Place of Business

Mailing Address

777 MOORING LINE DR.
NAPLES FL 34102

777 MOORING LINE DR.
NAPLES FL 34102

3. Date Incorporated or Qualified

07/07/1997

4. FEI Number

65-0806628

Applied For

Not Applicable

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

24

25

29

30

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

10. Name and Address of New Registered Agent

GROTH, ROBERT W
1044 CASTELLO DR., SUITE 101
NAPLES FL 34103

81 Name

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

83

84 City

FL

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE D ☒ DELETE

NAME SCANDRETT, SANDRA
STREET ADDRESS 600 NEOPOLITAN WAY, #348
CITY-ST-ZIP NAPLES FL 34103

TITLE D ☐ DELETE

NAME STOHLER, ERMIL
STREET ADDRESS 136 FLAME VINE DR.
CITY-ST-ZIP NAPLES FL 34110

TITLE D ☐ DELETE

NAME BLAZEK, LINDA
STREET ADDRESS 2224 54TH TERR. SW
CITY-ST-ZIP NAPLES FL 34116

TITLE D ☐ DELETE

NAME LINDHALL, JEAN
STREET ADDRESS 2305 PICCADILLY CIRCUS
CITY-ST-ZIP NAPLES FL 34112

TITLE D ☐ DELETE

NAME HANDRICH, JANE
STREET ADDRESS 2811 CITRUS LAKE DR., J-102
CITY-ST-ZIP NAPLES FL 34109

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

P/O
Seitz, James
6150 Cypress Hollow Way
Naples, FL 34109

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

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:

James W. Seitz

4-3-98

941-262-8800

CR2E037 (10/97)