FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT 1995

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

APPROVED AND FILED
MAY 23 PM 10:15
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P94000073255 (9)

1. Corporation Name
TAMPA FINANCIAL SERVICES, INC.

Principal Place of Business	Mailing Address
2502 ROCKY POINT DR. SUITE 865 TAMPA FL 33615	2502 ROCKY POINT DR. SUITE 865 TAMPA FL 33615

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 10/05/1994
3a. Date of Last Report:

2. Principal Place of Business	2a. Mailing Address
21	26
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23	City & State 28
Zip 24 / Country 25	Zip 29 / Country 30

4. FEI Number: 59-3270387 — Applied For / Not Applicable

5. Certificate of Status Desired [ ] — $8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution [ ] — $5.00 May Be Added to Fees

8. This corporation has liability for intangible tax under S. 199.032 Florida Statutes [ ] Yes [X] No

9. Name and Address of Current Registered Agent	10. Name and Address of New Registered Agent
CORPORATION SERVICE COMPANY 1201 HAYS ST. TALLAHASSEE FL 32301	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 607.0502 and 607.1508, 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 607.0505, Florida Statutes.

SIGNATURE ______ (Signature of registered agent) ______ DATE

12. OFFICERS AND DIRECTORS	13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE: D NAME: GIBBONS, FREDERICK STREET ADDRESS: 2502 ROCKY POINT DR., STE. 865 CITY-ST-ZIP: TAMPA FL 33615	11 TITLE: P/D [X] Change [ ] Addition 12 NAME: Javed R. Janjua 13 STREET ADDRESS: 2502 Rocky Point Dr., Ste 865 14 CITY-ST-ZIP: Tampa FL 33607
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	21 TITLE / 22 NAME / 23 STREET ADDRESS / 24 CITY-ST-ZIP [ ] Change [ ] Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	31 TITLE / 32 NAME / 33 STREET ADDRESS / 34 CITY-ST-ZIP [ ] Change [ ] Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	41 TITLE / 42 NAME / 43 STREET ADDRESS / 44 CITY-ST-ZIP [ ] Change [ ] Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	51 TITLE / 52 NAME / 53 STREET ADDRESS / 54 CITY-ST-ZIP [ ] Change [ ] Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	61 TITLE / 62 NAME / 63 STREET ADDRESS / 64 CITY-ST-ZIP [ ] Change [ ] Addition

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(1)(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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: [signature] — SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/14/95 (Date) 209-9000 (Daytime Phone #)

0293026 CP

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* CORPORATION ANNUAL REPORT

1995

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State

APPROVED

DOCUMENT # **P94000073441 (5)**

1. Corporate Name

GRACE LUTHERAN CHURCH PROPERTIES, INC.

Principal Place of Business	Mailing Address
718 S.W. PORT ST LUCIE BLVD. PORT ST LUCIE FL 34953	718 S.W. PORT ST LUCIE BLVD. PORT ST LUCIE FL 34953

DO NOT WRITE IN THIS SPACE

3. Date Incorporated / Qualified: **10/06/1994** | 3a. Date of Last Report:

2. Principal Place of Business — 21 | 2a. Mailing Address — 26

Suite, Apt. # or Bldg. — 22 | Suite, Apt. # or Bldg. — 27

City & State — 23 | City & State — 28

Zip — 24 | County — 25 | Zip — 29 | County — 30

4. FEI Number: 65-0550758 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

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

8. *This corporation has liability to intangible tax under S. 199.032, Florida Statutes* ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

MUNDINGER, ORRIE R
718 S.W. PORT ST. LUCIE BLVD.
PORT ST. LUCIE FL 34953

10. Name and Address of New Registered Agent

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 section 607.0505 and 607.1508, 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 607.0505, Florida Statutes.

SIGNATURE

(If changing Registered Agent, New Registered Agent must sign above) (If changing Registered Agent, Registered Agent must sign above) DATE

12. OFFICER AND DIRECTOR DATA		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D	TITLE	☐ Change ☐ Addition
NAME	MUNDINGER, ORRIE R	NAME	
STREET ADDRESS	718 S.W. PORT ST. LUCIE BLVD.	STREET ADDRESS	
CITY-ST-ZIP	PORT ST. LUCIE FL 34953	CITY-ST-ZIP	
TITLE	D	TITLE	☐ Change ☐ Addition
NAME	EVANS, DARRELL	NAME	
STREET ADDRESS	718 S.W. PORT ST. LUCIE BLVD.	STREET ADDRESS	
CITY-ST-ZIP	PORT ST. LUCIE FL 34953	CITY-ST-ZIP	
TITLE	D	TITLE	☐ Change ☐ Addition
NAME	RICHEY, FRED	NAME	
STREET ADDRESS	718 S.W. PORT ST. LUCIE BLVD.	STREET ADDRESS	
CITY-ST-ZIP	PORT ST. LUCIE FL 34953	CITY-ST-ZIP	
TITLE		TITLE	☐ Change ☐ Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE		TITLE	☐ Change ☐ Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE		TITLE	☐ Change ☐ Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		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)(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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 of this report or on an attachment with an address.

SIGNATURE: Orrie R. Mundinger 4/3/96 (407) 336-8393

SIGNATURE AND TITLE OR PRINTED NAME OF FLORIDA OFFICER OR DIRECTOR — Date — Daytime Phone #

ORRIE R. MUNDINGER

0483843 FP

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CORPORATION ANNUAL REPORT 1995

APPROVED AND FILED

95 MAY 10 AM 10:15

SECRETARY OF STATE TALLAHASSEE, FLORIDA

DOCUMENT # P94000073710 (3)

1. SOROKA'S CHAIRS & INTERIORS, INC.

Principal Place of Business	Mailing Address
2480 N FEDERAL HIGHWAY LIGHTHOUSE POINT FL 33064	2480 N FEDERAL HIGHWAY LIGHTHOUSE POINT FL 33064

3. Date Incorporated: 10/07/1994

2. 21 1296 N FEDERAL HWY	2a. Mailing Address 26 1296 N FEDERAL HWY	4. FEI Number 65-0536184	Applied For / Not Applicable
22	27	5. Certificate of Status Desired	$8.75 Additional Fee Required
23 Pompano Beach FL	28 Pompano Beach FL	6. Election Campaign Financing Trust Fund Contribution	$5.00 May Be Added to Fees
24 33062 / 25 Broward	29 33062 / 30 Broward	8. This corporation is subject to intangible tax under ... Florida Statutes: X Yes / No	

9. **Name and Address of Current Registered Agent**

SOROKA, VYACHESLAV
2480 N FEDERAL HIGHWAY
LIGHTHOUSE POINT FL 33064

10. **Name and Address of New Registered Agent**

81 Name: SOROKA, VYACHESLAV
82 Street Address (P.O. Box Number is Not Acceptable): 1296 N FEDERAL HWY
83
84 City: Pompano Beach FL 85 Zip Code 33062

11. [illegible]

12. OFFICERS AND DIRECTORS

PD
SOROKA, VYACHESLAV
2480 N FEDERAL HIGHWAY
LIGHTHOUSE POINT FL 33064

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

X Change — PD
SOROKA, VYACHESLAV
1296 N FEDERAL HWY
Pompano Beach FL 33062

14. [illegible]

SIGNATURE: Vyacheslav Soroka 05.01.95 (305) 784 7353

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

0107103 CP