## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

**PROFIT CORPORATION ANNUAL REPORT** 

1998



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # P94000073441 (5)

GRACE LUTHERAN CHURCH PROPERTIES, INC.					
					()
Dela almat Diag		t da Olivara di Adalana a		<u> </u>	## # <b>####</b> ############################
1 '	e of Business	Mailing Address	urb.		
710 SW ST. LUCIE BLVD. 710 SW PT. ST. LUCIE BL PT. ST. LUCIE FL 34953 PT. ST. LUCIE FL 34953			VD.		
US US				DO NOT WRITE IN T	HIS SPACE
•				3. Date Incorporated or Qualified	
				10/06/1994	
	Place of Business	2a. Mailing Address		4. FEI Number	Applied For
21		26		65-0550758	Not Applicable
Suite, Apt.	#, <b>et</b> C.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional
City & Stat	10	City & State			Fee Required
23	e	<b>⊢</b> ′		Election Campaign Financing     Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip	Country	<b>28</b>	Country	8. This corporation owes or has paid the	
24	25	_ <del> </del>	io]	Personal Property Tax due June 30.	Yes \( \square \text{No} \)
=-1	9. Name and Address of Curren		~1	10. Name and Address of New Registe	
CLINE, JOHN B. 81 Name				Danallina T Vani	Δ8.104
TAR ON DE CE LUCIE DUE				Porothea J. VAN Press (P.O. Box Nymber is Not Acceptable)	HRNAM
PT. ST. LUCIE FL 34953			710	3W PEST LUCIE	BLV4
			83		
}			84 City C		es Zin Codo
			~  \civ P+	St Lucie 1	FL 🍍 ダ4953 📗
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 tamiliar with, and accept the obligations of. Section 607.0505, Florida Statutes.					
SIGNATURE	Dorothea J.	VAN ARNAM	Preside	ent Down winam	Trus 4-14-98
	Signature, typed or printed name of registered ager	if and title if applicable (NOTE:	Rogistered Agent signature requ	ired when reinstating DA	ŤE .
12.	OFFICERS AND	DELETE	13.	resident/Tres.	Change Addition
	CLINE, JOHN B.	Aprille		orothea I VAN ARA	JAM
NAME STREET ADDRESS	710 SW PT. ST. LUCIE BLVD.			10 SW P+ S+ Lucie	BLUD
CITY-ST-ZIP	PT. ST. LUCIE FL			10 300	34953
TITLE	D	DELETE	2.1 TITLE	· B1 .	☐ Change ☐ Addition
NAME	BAILEY, MELISSA		2.2 NAME		
STREET ADDRESS	710 SW PT. ST. LUCIE BLVD.		2.3 STREET ADDRESS		
CITY-ST-ZIP	PT. ST. LUCIE FL 34953		2. 4 CiTY-ST-ZiP	•	
TITLE	D	DELETE	3.1 TITLE	· · · · · · · · · · · · · · · · · · ·	Change Addition
NAME	HOFFMAN, CAROL	• 1	3.2 NAME		
STREET ADDRESS	710 SW ST, LUCIE BLVD.		3.3 STREET ADDRESS		
CITY-ST-ZIP	PT. ST. LUCIE FL 34953		3.4. CITY-ST-ZIP		
TITLE	D	DELETE	4.1 TITLE		Change Addition
NAME	YOUNG, RICHARD		4. 2 NAME		
STREET ADDRESS	710 SW PT ST LUCIE BLVD		4.3 STREET ADDRESS		
CITY-ST-ZIP	PORT ST LUCIE FL		4.4 CITY - ST - ZIP		
TITLE		DELETE	5.1 TITLE		Change Addition
NAME			5 2 NAME		ľ
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP		T an tree	5.4 CITY - ST - ZIP		
TITLE		☐ DELETE	G.1 TITLE		☐ Change ☐ Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		

CITY-ST-ZIP

14. I hereby certify that the information supplied with this filling 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 if changed, or on an attachment with an address.

**FILED** 

Apr 27 1998 8:00am

Secretary of State