

**2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 710773

**Entity Name:** IMMANUEL LUTHERAN CHURCH, INC.

**Current Principal Place of Business:**

1449 34 STREET NORTH WEST  
WINTER HAVEN, FL 33881-8903

**Current Mailing Address:**

1449 34 STREET NORTH WEST  
WINTER HAVEN, FL 33881-8903 US

**FEI Number:** 59-6046582

**Certificate of Status Desired:** No

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

SHEFFIELD, MIKE  
1449 34TH ST NW  
WINTER HAVEN, FL 33881 US

*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

**Officer/Director Detail :**

Title P  
Name ED, MORRIS  
Address 5702 SCOTT LAKE RD  
City-State-Zip: LAKELAND FL 33813

Title V  
Name KUEHNE, MICHAEL  
Address 409 GUY ROAD  
City-State-Zip: ORLANDO FL 32828

Title T  
Name SHEFFIELD, MIKE  
Address 215 CANAL ST  
City-State-Zip: AUBURNDALE FL 33823

Title D  
Name JOE, IRELAND  
Address 2353 LAKE DRIVE NW  
City-State-Zip: WINTER HAVEN FL 33881

Title S  
Name KUEHNE, JOHN  
Address 744 BURST AVE  
City-State-Zip: ORLANDO FL 32828

Title D  
Name KLEINSCHMIDT, DAVID  
Address 2718 BENAVIDES DRIVE  
City-State-Zip: THE VILLAGES FL 32162

*I hereby 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 all other like empowered.*

**SIGNATURE:** MIKE SHEFFIELD

**TREASURER**

**02/07/2019**

Electronic Signature of Signing Officer/Director Detail

Date