

**2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 752038

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

**Current Principal Place of Business:**

3975 HWY 90  
MARIANNA, FL 32446

**Current Mailing Address:**

3975 HWY 90  
MARIANNA, FL 32446 US

**FEI Number: 59-2493624**

**Certificate of Status Desired: No**

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

CONLEY, CAROLE J  
6944 MATTIE POND RD.  
BASCOM, FL 32423 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            PRES  
Name            KANDZER, JERRY DR.  
Address        2787 JACKSON BLUFF ROAD  
City-State-Zip: MARIANNA FL 32446

Title            VPRE  
Name            GORBET, DANIEL  
Address        4160 KIMBALL ROAD  
City-State-Zip: GREENWOOD FL 32443

Title            SEC  
Name            BARBARA, ABBITT  
Address        3935 MISSOURI RD  
City-State-Zip: MARIANNA FL 32446

Title            TRES  
Name            CONLEY, CAROLE J  
Address        6944 MATTIE POND RD.  
City-State-Zip: BASCOM FL 32423

Title            MEMB  
Name            CONLEY, LAWRENCE M  
Address        6944 MATTIE POND RD.  
City-State-Zip: BASCOM FL 32423

*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: CAROLE J. CONLEY**

**TREASURER**

**02/24/2014**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date