

**2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 755423

**Entity Name:** IMMANUEL LUTHERAN CHURCH OF BRANDON, FLORIDA, INC.

**FILED**  
**Apr 08, 2021**  
**Secretary of State**  
**9486314068CC**

**Current Principal Place of Business:**

2913 SO. JOHN MOORE ROAD  
BRANDON, FL 33511

**Current Mailing Address:**

2913 SO. JOHN MOORE ROAD  
BRANDON, FL 33511

**FEI Number: 59-1295945**

**Certificate of Status Desired: No**

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

FARNSWORTH, KENNETH WREV.  
1418 NEW BRITAIN DRIVE  
BRANDON, FL 33511 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            PRESIDENT  
Name            WILCOX, SCOTT  
Address        1321 DRAGON HEAD DRIVE  
City-State-Zip: VALRICO FL 33594

Title            FSD  
Name            DAVIS, IRENE  
Address        1304 ROCKWOOD DRIVE  
City-State-Zip: BRANDON FL 33510

Title            RSD  
Name            CROUSE, JOAN  
Address        817 SCENIC HEIGHTS DRIVE  
City-State-Zip: BRANDON FL 33511

Title            VP  
Name            ANTON, JR, WILLIAM R  
Address        3029 GEM LUSTER CT  
City-State-Zip: VALRICO FL 33594

Title            TREASURER  
Name            FELTON, DOUGLAS G.  
Address        1903 STREETMAN DRIVE  
City-State-Zip: LITHIA FL 33547

*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: SCOTT WILCOX**

**PRESIDENT**

**04/08/2021**

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

\_\_\_\_\_  
Date