

**2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 765844

**Entity Name:** LUTZ FAMILY CHURCH, INC.

**Current Principal Place of Business:**

960 W LUTZ LAKE FERN RD  
LUTZ, FL 33548-5028

**Current Mailing Address:**

960 W LUTZ LAKE FERN RD  
LUTZ, FL 33548-5028 US

**FEI Number:** 59-0751925

**Certificate of Status Desired:** No

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

BERLIN-BEASLEY, KIMBERLY  
960 W LUTZ LAKE FERN RD  
LUTZ, FL 33548-5028 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           CHAIRMAN  
Name           MARTIN, RYAN  
Address        18916 5TH PLACE SW  
City-State-Zip: LUTZ FL 33548

Title           TRUSTEE  
Name           BROWN, GORDON  
Address        18714 LAKESHORE DR  
City-State-Zip: LUTZ FL 33549

Title           TRUSTEE  
Name           DAMATO, TONY  
Address        17803 MORNINGHIGH DR  
City-State-Zip: LUTZ FL 33549

Title           TRUSTEE  
Name           CUMMINGS, ELIZABETH  
Address        2759 GARDEN PLUM PLACE  
City-State-Zip: ODESSA FL 33556-5144

Title           TRUSTEE  
Name           BOOTH, MARK  
Address        404 DUQUE RD.  
City-State-Zip: LUTZ FL 33549

Title           TRUSTEE  
Name           GRAY, JOE  
Address        3220 PLEASANT LAKE DR  
City-State-Zip: TAMPA FL 33618

*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:** RYAN MARTIN

**TRUSTEE CHAIRMAN**

**05/22/2024**

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

\_\_\_\_\_  
Date