

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 700334

FILED
Apr 17, 2008
Secretary of State

Entity Name: FAITH EVANGELICAL LUTHERAN CHURCH OF NEW PORT RICHEY, FLORIDA

Current Principal Place of Business:

5443 SUNSET ROAD
NEW PORT RICHEY, FL 34652

New Principal Place of Business:

Current Mailing Address:

5443 SUNSET ROAD
NEW PORT RICHEY, FL 34652

New Mailing Address:

FEI Number: 23-7040425 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

BROCK, JERRY
7951 TEAL DR
NEW PT RICHEY, FL 34653 US

Name and Address of New Registered Agent:

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

OFFICERS AND DIRECTORS:

Title: TD () Delete
Name: SPRINGER, CAROL
Address: 7725 TANGLEWOOD DRIVE
City-St-Zip: NEW PORT RICHEY, FL 34654 US

Title: PD () Delete
Name: FERGUSON, ROBERT
Address: 2235 ARCADIA ROAD
City-St-Zip: HOLIDAY, FL 34690 US

Title: ATD () Delete
Name: ANDERSON, JANET
Address: 4244 PRESERVE PLACE
City-St-Zip: PALM HARBOR, FL 34685 US

Title: SD () Delete
Name: GOODHUE, BARBARA
Address: 4727 DAPHNE STREET
City-St-Zip: NEW PORT RICHEY, FL 34652 US

Title: VPD () Delete
Name: SCHURKUS, ROBERT
Address: 2740 OAK BEND COURT
City-St-Zip: NEW PORT RICHEY, FL 34655 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ATD (X) Change () Addition
Name: SPRINGER, CAROL
Address: 7725 TANGLEWOOD DRIVE
City-St-Zip: NEW PORT RICHEY, FL 34654 US

Title: PD (X) Change () Addition
Name: HILL, KEVIN L
Address: 3409 MARSHFIELD DRIVE
City-St-Zip: HOLIDAY, FL 34691 US

Title: TD (X) Change () Addition
Name: KURY, RUDOLPH
Address: 2733 WHETHER DRIVE
City-St-Zip: HOLIDAY, FL 34691 US

Title: SD (X) Change () Addition
Name: BRENDEL, NANCY
Address: 3519 CALERA DRIVE
City-St-Zip: NEW PORT RICHEY, FL 34652 US

Title: VPD (X) Change () Addition
Name: LA VALLEE, RAY
Address: 2028 MAUI DRIVE
City-St-Zip: HOLIDAY, FL 34691 US

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: CAROLE CUPP FOR CAROL SPRINGER

Electronic Signature of Signing Officer or Director

ATD

04/17/2008

Date