

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 700334

FILED
Mar 18, 2009
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: ATD () Delete
Name: SPRINGER, CAROL
Address: 7725 TANGLEWOOD DRIVE
City-St-Zip: NEW PORT RICHEY, FL 34654 US

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

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

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

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: TD (X) Change () Addition
Name: FUNFGELD, DOROTHY
Address: 9518 VIA SEGOVIA
City-St-Zip: NEW PORT RICHEY, FL 34655 US

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

Title: ATD (X) Change () Addition
Name: HURFF, CATHERINE
Address: 6146 - 6TH AVENUE
City-St-Zip: NEW PORT RICHEY, FL 34653 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: KEVIN LEE HILL

PD

03/18/2009

Electronic Signature of Signing Officer or Director

Date