

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 702917

FILED  
Jan 31, 2007  
Secretary of State

Entity Name: ATONEMENT LUTHERAN CHURCH, INCORPORATED

**Current Principal Place of Business:**

1178 LAKEVIEW DRIVE  
SEBRING, FL 33870

**New Principal Place of Business:**

**Current Mailing Address:**

1178 LAKEVIEW DRIVE  
SEBRING, FL 33870

**New Mailing Address:**

FEI Number: 59-1857294

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

FERNSLER, EUGENE R.  
1178 LAKEVIEW DR  
SEBRING, FL 33870 US

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

YOUNG, OWEN M  
1178 LAKEVIEW DR  
SEBRING, FL 33870 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: OWEN M. YOUNG

01/31/2007

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: VD ( ) Delete  
Name: FERNSLER, EUGENE R,  
Address: 129 SPARROW AVE  
City-St-Zip: SEBRING, FL 33872

Title: P ( ) Delete  
Name: YOUNG, MARTY  
Address: 1033 FERVALE AVE  
City-St-Zip: SEBRING, FL 33870

Title: TD ( ) Delete  
Name: BARTELS, KEN  
Address: 4224 CREMONA DR  
City-St-Zip: SEBRING, FL 33872

Title: SD ( ) Delete  
Name: STEPHENSON, PEG,  
Address: 3005 ASHLEY OAKS W  
City-St-Zip: SEBRING, FL 33872

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: VD (X) Change ( ) Addition  
Name: PORTZ, TOM  
Address: 1710 DAHLIA TERR.  
City-St-Zip: SEBRING, FL 33875

Title: PD (X) Change ( ) Addition  
Name: YOUNG, OWEN M  
Address: 1033 FERVALE AVE  
City-St-Zip: SEBRING, FL 33870

Title: T (X) Change ( ) Addition  
Name: GOSSETT, SHEL  
Address: 4417 DEERWOOD DR.  
City-St-Zip: ZOLFO SPRINGS, FL 33890

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: OWEN M. YOUNG

PD

01/31/2007

Electronic Signature of Signing Officer or Director

Date