

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 704595

FILED
Apr 13, 2009
Secretary of State

Entity Name: THE ABIDING SAVIOR LUTHERAN CHURCH OF WINTER HAVEN, INC.

Current Principal Place of Business:

1910 HAVENDALE BLVD
WINTER HAVEN, FL 338811235 US

New Principal Place of Business:

Current Mailing Address:

1910 HAVENDALE BLVD
WINTER HAVEN, FL 338811235 US

New Mailing Address:

FEI Number: 59-6607009

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FORD, ALAN J
1910 HAVENDALE BLVD
WINTER HAVEN, FL 33881 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: P () Delete
Name: MAILLOUX, ANN
Address: 242 HILL CT
City-St-Zip: WINTER HAVEN, FL 33881

Title: VD () Delete
Name: FRENZEL, RICHARD
Address: 525 BLUFF DR
City-St-Zip: AUBURNDALE, FL 33823

Title: TD () Delete
Name: FISHER, JANET
Address: 72 SAINT KITTS CIRCLE
City-St-Zip: WINTER HAVEN, FL 338843500

Title: SD () Delete
Name: BEHRLE, ALICE
Address: 106 MUSTANG TERRACE
City-St-Zip: HAINES CITY, FL 33844

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: VD (X) Change () Addition
Name: MILLER, KEVIN
Address: 105 COSTA LOOP
City-St-Zip: AUBURNDALE, FL 33823

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

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

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: JANET FISHER

TD

04/13/2009

Electronic Signature of Signing Officer or Director

Date