

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 734105

FILED
Feb 27, 2009
Secretary of State

Entity Name: UNIVERSITY EVANGELICAL LUTHERAN CHURCH, INCORPORATED

Current Principal Place of Business:

1826 WEST UNIVERSITY AVENUE
GAINESVILLE, FL 32603

New Principal Place of Business:

Current Mailing Address:

1826 WEST UNIVERSITY AVENUE
GAINESVILLE, FL 32603

New Mailing Address:

FEI Number: 59-1091078

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

COLLINS, MICHAEL L REV DR
13708 SW 1 LANE
NEWBERRY, FL 32669 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: GOLDWIRE, RAY
Address: 5000 56125 BLVD #2117
City-St-Zip: GAINESVILLE, FL 32608

Title: VP () Delete
Name: CHAMBERLIN, JEANNE
Address: 2632 NW 28 PL
City-St-Zip: GAINESVILLE, FL 32605

Title: S () Delete
Name: JOHNSON, MARK
Address: 4913 NW 21 ST
City-St-Zip: GAINESVILLE, FL 32606

Title: T () Delete
Name: YALE, JIM
Address: 8520 SW 99 PL
City-St-Zip: GAINESVILLE, FL 32608

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: JOHNSON, MARK
Address: 4913 NW 21 STREET
City-St-Zip: GAINESVILLE, FL 32605

Title: VP (X) Change () Addition
Name: GOLDWIRE, RAY
Address: 5000 56125 BLVD #2117
City-St-Zip: GAINESVILLE, FL 32608

Title: S (X) Change () Addition
Name: SAMMONS, BECKY
Address: 2005 NW 89 DR
City-St-Zip: GAINESVILLE, FL 32606

Title: T (X) Change () Addition
Name: SAMMUEL, SHANTI
Address: 10418 NW 13 AVE
City-St-Zip: GAINESVILLE, FL 32606

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: MICHAEL L COLLINS

PAS

02/27/2009

Electronic Signature of Signing Officer or Director

Date