## 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED Jan 17, 2008 Secretary of State **DOCUMENT# 747004** 

Entity Name: LIVING FAITH, A CHURCH OF THE LUTHERAN BRETHREN INCORPORATED

**Current Principal Place of Business: New Principal Place of Business:** 939 SW 7TH CT CAPE CORAL, FL 339912422 **Current Mailing Address: New Mailing Address:** 939 SW 7TH CT CAPE CORAL, FL 339912422 FEI Number: 59-2406713 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired (X) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: TURNER, TERRANCE M THURMER, PATRICK A 1212 NW 12TH PLACE 925 SW 6TH AVE CAPE CORAL, FL 33993 US CAPE CORAL, FL 33991 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: PATRICK A THURMER 01/17/2008 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition KAWA, JANEEN Name: Name: 1409 SW 29TH ST Address: Address: City-St-Zip: CAPE CORAL, FL 33914 City-St-Zip: Title: Title: ( ) Delete () Change () Addition SOHOLT, MARK Name: Name: Address: 3305 SE 1ST AVE Address: City-St-Zip: CAPE CORAL, FL 33904 City-St-Zip: Title: () Delete Title: () Change () Addition TURNER, TERRANCE M Name: Name: Address: 1212 NW 12 PL Address: City-St-Zip: CAPE CORAL, FL 33993 City-St-Zip: Title: ( ) Delete Title: () Change () Addition Name: DUGAN, GARRY Name: Address: 2236 NW 1 PL Address: City-St-Zip: CAPE CORAL, FL 33993 City-St-Zip: Title: () Delete Title: () Change () Addition TEETER, JAMES Name: Name: Address: 1033 SE 19 AVE Address: City-St-Zip: CAPE CORAL, FL 33990 City-St-Zip: Title: ( ) Delete Title: () Change () Addition THURMER, PATRICK A Name: Name: Address: 925 SW 6 AV Address: CAPE CORAL, FL 33991 City-St-Zip: 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: PATRICK A THURMER **REV** 01/17/2008