

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 810471

FILED  
Jan 10, 2007  
Secretary of State

Entity Name: WISCONSIN EVANGELICAL LUTHERAN SYNOD

**Current Principal Place of Business:**

2929 NORTH MAYFAIR ROAD  
MILWAUKEE, WI 532224398 US

**New Principal Place of Business:**

**Current Mailing Address:**

2929 NORTH MAYFAIR ROAD  
MILWAUKEE, WI 532224398 US

**New Mailing Address:**

FEI Number: 39-0842084

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

BEITLICH, PAUL D  
2033 MAIN STREET  
#101  
SARASOTA, FL 34237 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: GURGEL, KARL R  
Address: 2929 N MAYFAIR RD  
City-St-Zip: MILWAUKEE, WI 53222 US

Title: T ( ) Delete  
Name: POPPE, TODD J  
Address: 2929 N MAYFAIR ROAD  
City-St-Zip: MILWAUKEE, WI 53222 US

Title: SD ( ) Delete  
Name: ZARLING, THOMAS F  
Address: 6 WILTSHIRE CT E  
City-St-Zip: STERLING, VA 201655677 US

Title: D ( ) Delete  
Name: ANDERSON, DALE W  
Address: 2901 CHOTO RD, APT 6  
City-St-Zip: KNOXVILLE, TN 397226166 US

Title: D ( ) Delete  
Name: ANDERSON, RODGER  
Address: 204 SPRING ROAD  
City-St-Zip: SCHENECTADY, NY 123023717 US

Title: D ( ) Delete  
Name: AUSTAD, KURT L  
Address: 2512 E TERRARIDGE DR  
City-St-Zip: HIGHLANDS RANCH, CO 80126 US

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

Title: P (X) Change ( ) Addition  
Name: GURGEL, KARL R  
Address: 2929 N MAYFAIR RD  
City-St-Zip: MILWAUKEE, WI 532224398 US

Title: T (X) Change ( ) Addition  
Name: POPPE, TODD J  
Address: 2929 N MAYFAIR ROAD  
City-St-Zip: MILWAUKEE, WI 532224398 US

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

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

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 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: TODD J POPPE

T

01/10/2007

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date