

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 844440

FILED  
Jan 25, 2012  
Secretary of State

**Entity Name:** LUTHERAN CHURCH EXTENSION FUND-MISSOURI SYNOD

**Current Principal Place of Business:**

SUNSET CORPORATE CENTER  
10733 SUNSET OFFICE DR  
SUNSET HILL, MO 631271219 US

**New Principal Place of Business:**

**Current Mailing Address:**

P. O. BOX 229009  
ST LOUIS, MO 631229009 US

**New Mailing Address:**

**FEI Number:** 43-1151795

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

CT CORPORATION SYSTEM  
1200 S. PINE ISLAND ROAD  
PLANTATION, FL 33324 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:** V  
**Name:** CRUME, LARRY  
**Address:** 10733 SUNSET OFFICE DR  
**City-St-Zip:** SUNSET HILLS, MO 63127

**Title:** SD  
**Name:** MOKSNES, PAMELA  
**Address:** 9381 KIOWA TRAIL  
**City-St-Zip:** CHANHASSEN, MN 55317

**Title:** V  
**Name:** HELFRICH, TOM  
**Address:** 10733 SUNSET OFFICE DR  
**City-St-Zip:** SUNSET HILLS, MO 63127

**Title:** D  
**Name:** PETERSON, RANDALL  
**Address:** 2059 TRISSINO WAY  
**City-St-Zip:** GREEN BAY, WI 54313

**Title:** P  
**Name:** ROBERTSON, RICHARD PRES.  
**Address:** 10733 SUNSET OFFICE DRIVE  
**City-St-Zip:** ST. LOUIS, MO 63127

**Title:** V  
**Name:** JONES, BECCA  
**Address:** 10733 SUNSET OFFICE DRIVE  
**City-St-Zip:** ST. LOUIS, MO 63127

I hereby 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 all other like empowered.

**SIGNATURE:** MICHAEL KRUS

DIR

01/25/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date