

# 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 764234

FILED  
Mar 17, 2005  
Secretary of State

Entity Name: LUTHERAN SERVICES FLORIDA, INC.

**Current Principal Place of Business:**

3627A WEST WATERS AVENUE  
TAMPA, FL 33614 US

**New Principal Place of Business:**

**Current Mailing Address:**

3627A WEST WATERS AVENUE  
TAMPA, FL 33614 US

**New Mailing Address:**

FEI Number: 59-2198911

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

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

CFRA, LLC  
CORPORATE CENTER THREE AT INT'L PLAZA  
4221 W. BOY SCOUT BLVD, 10TH FLOOR  
TAMPA, FL 336075736 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: DS ( ) Delete  
Name: COBIELLA-OLSON, ANA  
Address: 3627A WEST WATERS AVENUE  
City-St-Zip: TAMPA, FL 33614

Title: DT ( ) Delete  
Name: BOWLES, MARGRET  
Address: 3627A WEST WATERS AVENUE  
City-St-Zip: TAMPA, FL 33614

Title: DC ( ) Delete  
Name: SELLEW, ROGER  
Address: 3627A WEST WATERS AVENUE  
City-St-Zip: TAMPA, FL 33614

Title: DVC ( ) Delete  
Name: MUELLER, DAVID REV.  
Address: 3627A WEST WATERS AVENUE  
City-St-Zip: TAMPA, FL 33614

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

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

Title: DT (X) Change ( ) Addition  
Name: TOCKLIN, ADRIAN  
Address: 3627A WEST WATERS AVENUE  
City-St-Zip: TAMPA, FL 33614

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 Section 119.07(3)(i), 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: JAMES A. WELLS

CEO

03/17/2005

Electronic Signature of Signing Officer or Director

Date