

2015 FOREIGN NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P38436

Entity Name: LUTHERAN WORLD RELIEF INC.**Current Principal Place of Business:**700 LIGHT STREET
BALTIMORE, MD 21230**Current Mailing Address:**700 LIGHT STREET
BALTIMORE, MD 21230**FEI Number:** 13-2574963**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**JOHNSON, REV. GEORGE L.
7860 SOUTHSIDE BLVD
JACKSONVILLE, FL 32256 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:**

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title DIRECTOR - SECRETARY
Name SCHULTZ, JONATHAN D
Address 700 LIGHT STREET
City-State-Zip: BALTIMORE MD 21230

Title DIRECTOR - CHAIR
Name EDWARDS, GLORIA
Address 700 LIGHT STREET
City-State-Zip: BALTIMORE MD 21230

Title DIRECTOR - VICE CHAIR
Name HINES-SHAH, JAYESH
Address 700 LIGHT STREET
City-State-Zip: BALTIMORE MD 21230

Title EXECUTIVE VICE PRESIDENT
Name WHISENANT, JEFFERY S
Address 700 LIGHT STREET
City-State-Zip: BALTIMORE MD 21230

Title DIRECTOR
Name COLE, EMRIED JR.
Address 700 LIGHT STREET
City-State-Zip: BALTIMORE MD 21230

Title DIRECTOR
Name CRAFT, WILLIAM J DR.
Address 700 LIGHT STREET
City-State-Zip: BALTIMORE MD 21230

Title DIRECTOR
Name GUNDERSON, STEVE HONORABLE
Address 700 LIGHT STREET
City-State-Zip: BALTIMORE MD 21230

Title DIRECTOR
Name EVENSON, LOUISE P DR.
Address 700 LIGHT STREET
City-State-Zip: BALTIMORE MD 21230

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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: DANIEL SPECKHARD**PRESIDENT****04/14/2015**

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name GRAEBER PORTER, EMMA
Address 700 LIGHT STREET
City-State-Zip: BALTIMORE MD 21230

Title DIRECTOR
Name SUKESSA, TEIZAZU T.
Address 700 LIGHT STREET
City-State-Zip: BALTIMORE MD 21230

Title PRESIDENT
Name SPECKHARD, DANIEL
Address 700 LIGHT STREET
City-State-Zip: BALTIMORE MD 21230

Title DIRECTOR
Name RUNTSCH, TIMOTHY
Address 700 LIGHT STREET
City-State-Zip: BALTIMORE MD 21230

Title DIRECTOR
Name REISER, LINDA K
Address 700 LIGHT STREET
City-State-Zip: BALTIMORE MD 21230

Title DIRECTOR
Name YAKIMOW, KRISTIN
Address 700 LIGHT STREET
City-State-Zip: BALTIMORE MD 21230

Title DIRECTOR
Name LOSE, DAVID
Address 700 LIGHT STREET
City-State-Zip: BALTIMORE MD 21230