2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 700008

FILED Apr 30, 2009 Secretary of State

Entity Name: REFORMATION EVANGELICAL LUTHERAN CHURCH, INC.

Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
	MICHIGAN A\), FL 32806	/E			
Current Mailing Address:			New Mailing Addres	New Mailing Address:	
800 EAST I ORLANDO	MICHIGAN A\), FL 32806	/E			
FEI Number:	59-6136683	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and	Address of C	Current Registered Agent:	Name and Address	of New Registered Agent:	
GREER, LI 811 PLATO ORLANDO		US			
	named entity of Florida.	submits this statement for the p	urpose of changing its registere	ed office or registered agent, or both,	
SIGNATUR	RE:				
	Electron	nic Signature of Registered Age	nt	Date	
OFFICERS AND DIRECTORS:			ADDITIONS/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	SD (BESSA, DONIA 4710 FERNCR ORLANDO, FL	EEK AVE.	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	KAISER, DARL	ORK RANCH DR.	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	DVP (HANISH, FRED 1616 CONWAY ORLANDO, FL	'ISLE CIRCLE	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	DT (UPPERCO, MA 307 OAK ESTA ORLANDO, FL	TES DR	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address:	PD (GREER, LINDA 811 PLATO AV ORLANDO, FL		Title: Name: Address: City-St-Zip:	() Change () Addition	

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: LINDA GREER PRES 04/30/2009