2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 700334

FILED Mar 18, 2009 Secretary of State

Entity Name: FAITH EVANGELICAL LUTHERAN CHURCH OF NEW PORT RICHEY, FLORIDA

Current Principal Place of Business: New Principal Place of Business:

5443 SUNSET ROAD NEW PORT RICHEY, FL 34652

Current Mailing Address: New Mailing Address:

5443 SUNSET ROAD NEW PORT RICHEY, FL 34652

FEI Number: 23-7040425 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

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

BROCK, JERRY **7951 TEAL DR** NEW PT RICHEY, FL 34653 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:

Date

Electronic Signature of Registered Agent

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

OFFICERS AND DIRECTORS:

(X) Change () Addition

ATD () Delete SPRINGER, CAROL HILL, KEVIN L Name: Name: 7725 TANGLEWOOD DRIVE Address: 3409 MARSHFIELD DRIVE Address: HOLIDAY, FL 34691 US City-St-Zip: NEW PORT RICHEY, FL 34654 US City-St-Zip:

Title: PD Title: (X) Change () Addition () Delete

HILL, KEVIN L Name: LA VALLE, RAY Name: Address: 3409 MARSHFIELD DRIVE Address: 2028 MAUI DRIVE City-St-Zip: HOLIDAY, FL 34691 US City-St-Zip: HOLIDAY, FL 34691 US

Title: () Delete Title: (X) Change () Addition

KURY, RUDOLPH FUNFGELD, DOROTHY Name: Name: Address: 2733 WHETHER DRIVE Address: 9518 VIA SEGOVIA

City-St-Zip: HOLIDAY, FL 34691 US City-St-Zip: NEW PORT RICHEY, FL 34655 US

(X) Change () Addition Title: SD () Delete Title: SD

BRENDEL, NANCY Name: Name: GOODHUE, BARBARA A

3519 CALERA DRIVE Address: Address: 4727 DAPHNE STREET

City-St-Zip: NEW PORT RICHEY, FL 34652 US City-St-Zip: NEW PORT RICHEY, FL 34652 US

Title: () Delete Title: (X) Change () Addition LA VALLEE, RAY HURFF, CATHERINE Name: Name:

2028 MAUI DRIVE 6146 - 6TH AVENUE Address: Address:

City-St-Zip: HOLIDAY, FL 34691 US City-St-Zip: NEW PORT RICHEY, FL 34653 US

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: KEVIN LEE HILL PD 03/18/2009