2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 700634

FILED Jun 24, 2007 Secretary of State

Entity Name: NORTHDALE EVANGELICAL LUTHERAN CHURCH AND SCHOOL, INC.

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

15709 MAPLEDALE BLVD. TAMPA, FL 33624 US

Current Mailing Address: New Mailing Address:

15709 MAPLEDALE BLVD. TAMPA, FL 33624 US

FEI Number: 59-2379252 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

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

HARTWIG, DAVID W
12004 MIDDLEBURY DR
TAMPA, FL 33626 US

LOESCHER, TODD P
28806 FALLING LEAVES WAY
WESLEY CHAPEL, FL 33543 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: TODD P. LOESCHER 06/24/2007

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

 Name:
 HARTWIG, DAVID
 Name:
 MOORE, KEITH

 Address:
 12004 MIDDLEBURY DR.
 Address:
 20942 SUNSWEET COURT

 City-St-Zip:
 TAMPA, FL 33626
 City-St-Zip:
 LAND O'LAKES, FL 34639

Title: VD () Delete Title: VD (X) Change () Addition Name: LANGE, KEN Name: BUBLITZ, RICHARD

 Address:
 6904 ARABIAN RD
 Address:
 2106 PARK CRESCENT DRIVE

 City-St-Zip:
 TAMPA, FL 33556
 City-St-Zip:
 LAND O'LAKES, FL 34649

Title: SD () Delete Title: SD (X) Change () Addition Name: ORRIE, ANDERSON Name: LOESCHER, TODD

 Name:
 ORRIE, ANDERSON
 Name:
 LOESCHER, TODD

 Address:
 21805 OCEAN PINES DR.
 Address:
 28806 FALLING LEAVES WAY

 City-St-Zip:
 LAND-O-LAKES, FL
 City-St-Zip:
 WESLEY CHAPEL, FL
 33543

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

 Name:
 ROBERTS, CHRIS
 Name:

 Address:
 5244 MAPPLEBROOK WAY
 Address:

 City-St-Zip:
 WESLEY CHAPEL, FL 33543
 City-St-Zip:

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: TODD P. LOESCHER SD 06/24/2007