2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 19, 2009
Secretary of State

DOCUMENT# 701739

Entity Name: ASCENSION LUTHERAN CHURCH OF CASSELBERRY, INC.

Current Principal Place of Business:

351 ASCENSION DRIVE
CASSELBERRY, FL 327073801

New Principal Place of Business:

Current Mailing Address:

351 ASCENSION DRIVE
CASSELBERRY, FL 327073801

New Mailing Address:

FEI Number: 59-6140406 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

THOMASON, STEVEN E
3812 NEEDLES DR.
ORLANDO, FL 32810 US

Name and Address of New Registered Agent:

SIMS, RALEIGH N
638 BLENHEIM LOOP
WINTER SPRINGS, FL 32708 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: RALEIGH N. SIMS 03/19/2009
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: PD ( ) Delete
Name: THOMASON, STEVEN E
Address: 3812 NEEDLES DR
City-St-Zip: ORLANDO, FL 32810

Title: VD ( ) Delete
Name: SIMS, RALEIGH N
Address: 638 BLENHEIM LOOP
City-St-Zip: WINTER SPRINGS, FL 32708

Title: SD ( ) Delete
Name: NOWICKI, SARAH E
Address: 985 WILLOW RUN LANE
City-St-Zip: WINTER SPRINGS, FL 32708

Title: TD ( ) Delete
Name: SPARK, RICHARD M
Address: 378 HAVERLAKE
City-St-Zip: APOPKA, FL 32712

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition
Name: SIMS, RALEIGH N
Address: 638 BLENHEIM LOOP
City-St-Zip: WINTER SPRINGS, FL 32708

Title: VD (X) Change ( ) Addition
Name: CHILDRESS, STEVEN
Address: 2815 CADY WAY
City-St-Zip: WINTER PARK, FL 32792

Title: SD (X) Change ( ) Addition
Name: SCOTT, HILBORN
Address: 30 MERLIN COURT
City-St-Zip: CASSELBERRY, FL 32707

Title: ( ) Change ( ) Addition
Name:
Address:
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: DAVID A ISAACSON BMGR 03/19/2009
Electronic Signature of Signing Officer or Director Date