2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 701894

FILED Apr 07, 2009 Secretary of State

Entity Name: EMMANUEL LUTHERAN CHURCH, INC.

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

790 S TAMIAMI TRL VENICE, FL 342853601

Current Mailing Address: New Mailing Address:

790 S TAMIAMI TRL VENICE, FL 342853601

FEI Number: 59-1351925 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

HOFELICH, JOAN
2126 TIMUCUA TRL
NOKOMIS, FL 342755306 US

PINKERTON, SCOTT
570 N. RIVER RD.
VENICE, FL 342934708 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: SCOTT PINKERTON 04/07/2009

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD () Delete Title: PD (X) Change () Addition Name: PINKERTON, SCOTT Name: PINKERTON, SCOTT

 Name:
 PRINTER TON, SCOTT
 Name:
 PRINTER TON, SCOTT

 Address:
 570 N. RIVER RD
 Address:
 570 N. RIVER RD

 City-St-Zip:
 VENICE, FL 342934708
 City-St-Zip:
 VENICE, FL 342934708 US

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

Name: STEHL, DOTTIE Name: RENZ, LINDA

 Address:
 1307 COOPERWOOD DR.
 Address:
 1520 SAN YSIDRO WAY

 City-St-Zip:
 OSPREY, FL 342297807
 City-St-Zip:
 VENICE, FL 342854585 US

Title: TD () Delete Title: () Change () Addition

 Name:
 LIGHT, MARTY
 Name:

 Address:
 764 VILLIAGE CIR # 117
 Address:

 City-St-Zip:
 VENICE, FL 342922200
 City-St-Zip:

 $\label{eq:title: VD () Delete Title: VD (X) Change () Addition} \end{minipage}$

Name: RAUCH, FRANK Name: PICKERING, KATHLEEN Address: 130 SUNAIRE TERR Address: 161 MONTELLUNA DR.

City-St-Zip: NOKOMIS, FL 342752544 City-St-Zip: NORTH VENICE, FL 342756615 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: MARTY LIGHT TD 04/07/2009