

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 701948

FILED
Jan 09, 2009
Secretary of State

Entity Name: CHRIST THE KING LUTHERAN CHURCH, INCORPORATED

Current Principal Place of Business:

1577 SUNSET STRIP N.W. 61ST AVENUE
FORT LAUDERDALE, FL 33313

New Principal Place of Business:

Current Mailing Address:

1577 SUNSET STRIP N.W. 61ST AVENUE
FORT LAUDERDALE, FL 33313

New Mailing Address:

FEI Number: 59-0995239

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WALDRON, JOHN G
19451 SHERIDAN ST #290
FORT LAUDERDALE, FL 33332 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: BORGANDALE, MAC
Address: 12041 NW 29TH ST
City-St-Zip: SUNRISE, FL 33323

Title: T () Delete
Name: DACRES, CLAUDETTE
Address: 5999 NW 18TH CT
City-St-Zip: SUNRISE, FL 33313

Title: O () Delete
Name: HEADRICK, ALMAREE
Address: 3948 NW 39TH AVE
City-St-Zip: LAUDERDALE LAKES, FL 33309

Title: S () Delete
Name: WALDRON, JOHN
Address: 19451 SHERIDAN ST #290
City-St-Zip: FORT LAUDERDALE, FL 33332

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: CLAUDETTE DACRES

T

01/09/2009

Electronic Signature of Signing Officer or Director

Date