2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 29, 2005
Secretary of State

DOCUMENT# 702972

Entity Name: FAITH EVANGELICAL LUTHERAN CHURCH OF LEHIGH ACRES, FLORIDA, INC.

Current Principal Place of Business:

705 E. LEELAND HTS. BLVD.
LEHIGH ACRES, FL 33936

New Principal Place of Business:

Current Mailing Address:

705 E. LEELAND HTS. BLVD.
LEHIGH ACRES, FL 33936

New Mailing Address:

FEI Number: 59-2330940 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SCHULTZ, LORRAINE
31 DESERT CANDLE CIR.
LEHIGH ACRES, FL 33936 US

Name and Address of New Registered Agent:

SCHMIDT, MICHAEL
2606 ELVA PL
LEHIGH ACRES, FL 33972 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: MICHAEL SCHMIDT 04/29/2005
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: PD ( ) Delete
Name: SCHMIDT, MICHAEL
Address: 2606 ELVA PL.
City-St-Zip: LEHIGH ACRES, FL 33972

Title: VD ( ) Delete
Name: FJELSTED, SID
Address: 302 LINCOLN AVE
City-St-Zip: LEHIGH ACRES, FL 33936

Title: SD ( ) Delete
Name: MCINTYRE, ED
Address: 1211 HIBISCUS AVE
City-St-Zip: LEHIGH ACRES, FL 33970

Title: TD ( ) Delete
Name: SCHULTZ, LORRAINE
Address: 1522 HUNTDALE
City-St-Zip: LEHIGH ACRES, FL 33936

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: TD (X) Change ( ) Addition
Name: SCHMIDT, MICHAEL
Address: 2606 ELVA PL.
City-St-Zip: LEHIGH ACRES, FL 33972

Title: VD (X) Change ( ) Addition
Name: WEST, ELEANORE
Address: 1300 WOODWARD CT, #73
City-St-Zip: LEHIGH ACRES, FL 33936

Title: PD (X) Change ( ) Addition
Name: MCINTYRE, ED
Address: 1211 HIBISCUS AVE
City-St-Zip: LEHIGH ACRES, FL 33970

Title: SD (X) Change ( ) Addition
Name: CRAIG, EDITH
Address: 106 WELLS AVE
City-St-Zip: LEHIGH ACRES, FL 33972

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: MICHAEL SCHMIDT TD 04/29/2005
Electronic Signature of Signing Officer or Director Date