2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 27, 2008 8:00 am
Secretary of State
05-27-2008 90038 048 ****61.25

DOCUMENT # 702972

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

40105003

Principal Place of Business	Mailing Address
705 E. LEELAND HTS. BLVD. LEHIGH ACRES, FL 33936	705 E. LEELAND HTS. BLVD. LEHIGH ACRES, FL 33936

03232008 Chg-NP CR2E037 (12/06)

2. Principal Place of Business - No P.O. Box #	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

4. FEI Number 59-2330940 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

MOLL, BARRY
1404 ARCHER ST
LEHIGH ACRES, FL 33972

7. Name and Address of New Registered Agent

Name # McIntyre, Patricia
Street Address (P.O. Box Number is Not Acceptable)
1211 Hibiscus Ave
City Lehigh Acres FL Zip Code 33972

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE Barry C Moll
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

Filing Fee is $61.25
Due by May 1, 2008

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

Make check payable to Florida Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD MOLL, BARRY 1404 ARCHER ST LEHIGH ACRES, FL 33972	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VD WEST, ELEANORE 1300 WOODWARD CT, #73 LEHIGH ACRES, FL 33936	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Delete	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD VESPER, JEANETTE 14 TEMPLE CT LEHIGH ACRES, FL 33936	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD CRAIG, EDITH 106 WELLS AVE LEHIGH ACRES, FL 33972	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Delete	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VD Schmidt, Sherri 2600 Elva Place Lehigh Acres FL 33971	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD McIntyre, Patricia 1211 Hibiscus Ave Lehigh Acres FL 33972	☐ Change ☒ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Pat McIntyre 4/8/08 239-533-2221
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #