2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 704893

FILED Feb 08, 2012 Secretary of State

Entity Name: ST. ANDREW LUTHERAN CHURCH, INC.

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

295 NORTH WEST PRIMA VISTA BLVD PORT ST LUCIE, FL 34983

Current Mailing Address: New Mailing Address:

295 NORTH WEST PRIMA VISTA BLVD PORT ST LUCIE, FL 34983

FEI Number: 59-1098277 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:

DANGERFIELD, DAVID E REV 295 NW PRIMA VISTA BLVD PORT ST LUCIE, FL 34983 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:

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: I

 Name:
 DESIMONE, RON

 Address:
 4249 SE HOME WAY

 City-St-Zip:
 PORT ST. LUCIE, FL 34952

Title:

Name: WINDT, JUDY

Address: 444 SW HIBISCUS STREET City-St-Zip: FORT PIERCE, FL 34983

Title:

 Name:
 STILWELL, PATRICIA

 Address:
 766 SW CURTIS STREET

 City-St-Zip:
 PORT SAINT LUCIE, FL 34983

Title:

Name: DOMBROWSKY, NORBERT Address: 472 SW FUGE ROAD City-St-Zip: STUART, FL 34997

Title: [

Name: KOLETSKY, ARLO

Address: 5402 NW CHICOPA STREET
City-St-Zip: PORT SAINT LUCIE, FL 34983

Title: [

Name: ALLTOP, JAMES
Address: 6001 ADONIDIA PLACE
City-St-Zip: FORT PIERCE, FL 34982

I hereby 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 all other like empowered.

SIGNATURE: RON DESIMONE P 02/08/2012