

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 706078

FILED
Apr 16, 2009
Secretary of State

Entity Name: THE LUTHERAN CHURCH OF OUR SAVIOUR, INC.

Current Principal Place of Business:

8401 WEST HILLSBOROUGH AVE.
TAMPA, FL 33615

New Principal Place of Business:

Current Mailing Address:

8401 WEST HILLSBOROUGH AVE.
TAMPA, FL 33615

New Mailing Address:

FEI Number: 59-1200786

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SPAULDING, BRYAN
11903 KEATING DRIVE
TAMPA, FL 33626 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: D () Delete
Name: GROH, KAREN
Address: 12004 TREVINO PL
City-St-Zip: TAMPA, FL 336244551

Title: D () Delete
Name: O'REILLY, TOM
Address: 4155 SALTWATER BLVD
City-St-Zip: TAMPA, FL 336155638

Title: PD () Delete
Name: SPAULDING, BRYAN
Address: 11903 KEATING DRIVE
City-St-Zip: TAMPA, FL 33626

Title: D () Delete
Name: GRIFFITH, GARY
Address: 303 FAIRFIELD STREET
City-St-Zip: OLDSMAR, FL 34677

Title: TD () Delete
Name: THAMBIRAS, DENSINGH
Address: 8726 CHADWICK DR.
City-St-Zip: TAMPA, FL 33635

Title: VD () Delete
Name: COUSINS, CAROL
Address: 11228 BLOOMINGTON DR.
City-St-Zip: TAMPA, FL 336351522

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: SD (X) Change () Addition
Name: SOHL, PAT
Address: 7007 SHENANDOAH CT.
City-St-Zip: TAMPA, FL 336152960

Title: D (X) Change () Addition
Name: SWAIN, ROGER
Address: 7003 SEABURY CT
City-St-Zip: TAMPA, FL 336152958

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: PAT SOHL

SD

04/16/2009

Electronic Signature of Signing Officer or Director

Date