

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 710773

FILED  
Mar 19, 2009  
Secretary of State

Entity Name: IMMANUEL LUTHERAN CHURCH, INC.

**Current Principal Place of Business:**

1449 34 STREET NORTH WEST  
WINTER HAVEN, FL 338818903

**New Principal Place of Business:**

**Current Mailing Address:**

1449 34 STREET NORTH WEST  
WINTER HAVEN, FL 338818903

**New Mailing Address:**

FEI Number: 59-6046582      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

SHEFFIELD, MIKE  
1449 34TH ST NW  
WINTER HAVEN, FL 33881      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: HOLMES, DAVID  
Address: 221 LAKE HOWARD DR  
City-St-Zip: BABSON PARK, FL 33827

Title: V      ( ) Delete  
Name: JAEHNIGEN, ROLF  
Address: 900 HOWARD TERR NW  
City-St-Zip: WINTER HAVEN, FL 33881

Title: T      ( ) Delete  
Name: SHEFFIELD, MIKE  
Address: 215 CANAL ST  
City-St-Zip: AUBURNDALE, FL 33823

Title: D      ( ) Delete  
Name: SHOAF, JERRY  
Address: 9033 WOODVIEW DR  
City-St-Zip: POLK CITY, FL 33868

Title: S      ( ) Delete  
Name: KUEHNE, JOHN  
Address: 744 BURST AVE  
City-St-Zip: ORLANDO, FL 32828

Title: D      ( ) Delete  
Name: REAM, DARRIN  
Address: 4303 SHADOW WOOD  
City-St-Zip: WINTER HAVEN, FL 33880

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: P      (X) Change ( ) Addition  
Name: JAEHNIGEN, ROLF  
Address: 900 HOWARD TERR NW  
City-St-Zip: WINTER HAVEN, FL 33881

Title: V      (X) Change ( ) Addition  
Name: REAM, DARRIN  
Address: 4303 SHADOW WOOD  
City-St-Zip: WINTER HAVEN, FL 33880

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

Title: D      (X) Change ( ) Addition  
Name: SHOAF, JERRY  
Address: 260 WEST HARBORD STREET  
City-St-Zip: LAKE ALFRED, FL 33850

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

Title: D      (X) Change ( ) Addition  
Name: KLEINSCHMIDT, DAVID  
Address: 2718 BENAVIDES DRIVE  
City-St-Zip: THE VILLAGES, FL 32162

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: MIKE SHEFFIELD

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03/19/2009

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date