

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 710936

FILED
Jan 11, 2009
Secretary of State

Entity Name: ST. JOHN LUTHERAN CHURCH, INC.

Current Principal Place of Business:

10495 SUNSET HARBOR RD.
SUMMERFIELD, FL 34491 US

New Principal Place of Business:

Current Mailing Address:

10495 SUNSET HARBOR RD
SUMMERFIELD, FL 34491 US

New Mailing Address:

FEI Number: 59-3285000

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RANGAS, GLENN R
1859 BORDEAUX AVE.
THE VILLAGES, FL 32162 US

Name and Address of New Registered Agent:

KANGAS, GLENN R
1859 BORDEAUX AVE.
THE VILLAGES, FL 32162 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: GLENN KANGAS

01/11/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: VP () Delete
Name: FISCHER, JEAN
Address: 16894 SE 77TH NORTHRIDGE CT.
City-St-Zip: THE VILLAGES, FL 32162

Title: P () Delete
Name: MCLEAN, DICK
Address: PO BOX 225
City-St-Zip: WEIRSDALE, FL 32195

Title: T () Delete
Name: KANGAS, GLENN
Address: 1859 BORDEAUX AVE
City-St-Zip: THE VILLAGES, FL 32162

Title: D () Delete
Name: BURRALL, ANNE BOURES
Address: 13390 SUNSET HARBOR RD
City-St-Zip: WEIRSDALE, FL 32195

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: DICK MCLEAN

P

01/11/2009

Electronic Signature of Signing Officer or Director

Date