

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 711339

FILED
Apr 14, 2009
Secretary of State

Entity Name: GUARDIAN LUTHERAN CHURCH AND SCHOOL OF MANDARIN, FLORIDA, INC.

Current Principal Place of Business:

4911 LOSCO ROAD
JACKSONVILLE, FL 322571503

New Principal Place of Business:

Current Mailing Address:

4911 LOSCO ROAD
JACKSONVILLE, FL 322571503

New Mailing Address:

FEI Number: 59-1153478

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KORMAN, ROBERT
1530 STONE BRIAR RD.
GREEN COVE SPRINGS, FL 32043 US

Name and Address of New Registered Agent:

BENNETT, GREGORY
205 SOPHIA TERRACE
ST. AUGUSTINE, FL 32095 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: GREGORY BENNETT

04/14/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: KORMAN, ROBERT
Address: 1530 STONE BRIAR RD.
City-St-Zip: GREEN COVE SPRINGS, FL 32043

Title: TD () Delete
Name: KOLESAR, RUDOLF
Address: 11210 RUSTIC PINES CIRCLE
City-St-Zip: JACKSONVILLE, FL 32257

Title: SD () Delete
Name: JENNEJAHN, MARNI
Address: 10263 WHISPERING FOREST DR #1209
City-St-Zip: JACKSONVILLE, FL 32257

Title: VD () Delete
Name: HATCHER, MARK
Address: 7542 SCARLET IBIS LN
City-St-Zip: JACKSONVILLE, FL 32256

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: BENNETT, GREGORY
Address: 205 SOPHIA TERRACE
City-St-Zip: ST. AUGUSTINE, FL 32095

Title: TD (X) Change () Addition
Name: SAUNIER, JANET
Address: 11042 READING ROAD
City-St-Zip: JACKSONVILLE, FL 32257

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

Title: VD (X) Change () Addition
Name: PORTIE, JOHN
Address: 10426 WINDFERN COURT S.
City-St-Zip: JACKSONVILLE, FL 32257

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: CHRISTY PERKINS

BM

04/14/2009

Electronic Signature of Signing Officer or Director

Date