2009 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

FILED Dec 09, 2009 **DOCUMENT#717453** Secretary of State

Entity Name: PEACE LUTHERAN CHURCH OF HOLIDAY, FLORIDA, INC.

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

2205 ARCADIA RD HOLIDAY, FL 346901304

Current Mailing Address: New Mailing Address:

2205 ARCADIA RD HOLIDAY, FL 346901304

FEI Number: 59-2262388 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:

HACHMEISTER, LEN DURY, LEE 2500 WOOD POINTE DRIVE 7034 MAYFIELD DRIVE US PORT RICHEY, FL 34668 HOLIDAY, FL 34691

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: LEE J. DURY 12/09/2009

> Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

PTD () Delete (X) Change () Addition

HACHMEISTER, LEN DURY, LEE Name: Name: 7034 MAYFIELD DRIVE Address: 2500 WOOD POINTE DRIVE Address: City-St-Zip: PORT RICHEY, FL 34668 City-St-Zip: HOLIDAY, FL 34691

Title: VFSD () Delete Title: **VFSD** (X) Change () Addition

Name: DURY, LEE Name: LAURIN, MIKE

Address: 6142 FLORIDA AVENUE Address: 2622 LAKE HAVEN DRIVE City-St-Zip: NEW PORT RICHEY, FL 34653 City-St-Zip: NEW PORT RICHEY, FL 34655

Title: () Delete Title: SD (X) Change () Addition

LAURIN, MIKE Name: LEWIS, JEFF Name:

2622 LAKE HAVEN DRIVE 1451 BOOKMAN DRIVE Address: Address: City-St-Zip: NEW PORT RICHEY, FL 34655 City-St-Zip: HOLIDAY, FL 34690

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: LEE J. DURY PTD 12/09/2009