

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 725822

FILED
Apr 10, 2006
Secretary of State

Entity Name: LUTHERAN MINISTRY IN CHRIST, CORAL SPRINGS, BROWARD COUNTY, FLORIDA, INC.

Current Principal Place of Business:

NGS BROWARD COUNTY FLORIDA INC.
10021 W. SAMPLE ROAD
CORAL SPRINGS, FL 33065

New Principal Place of Business:

Current Mailing Address:

NGS BROWARD COUNTY FLORIDA INC.
10021 W. SAMPLE ROAD
CORAL SPRINGS, FL 33065 US

New Mailing Address:

FEI Number: 59-1381047

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

REED, REGINA
2400 NW 18 TERRACE
CORAL SPRINGS, FL 33065 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: PT () Delete
Name: PARKER, JULIE MS.
Address: 2045 NW 45 ST.
City-St-Zip: COCONUT CREEK, FL 33066

Title: VT () Delete
Name: GROLL, JAYNE MRS.
Address: 8855 SW 1 PL.
City-St-Zip: CORAL SPRINGS, FL 33071

Title: S () Delete
Name: STAUDENMAIER, PETER MR.
Address: 5202 NW 109 LN
City-St-Zip: CORAL SPRINGS, FL 33076

Title: T () Delete
Name: REED, KENDALL MR.
Address: 2400 NW 118 TER
City-St-Zip: CORAL SPRINGS, FL 33065

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change () Addition
Name: BETLACH, DOUG MR
Address: 3502 BROKEN WOODS DRIVE
City-St-Zip: CORAL SPRINGS, FL 33065

Title: VP (X) Change () Addition
Name: SCHUMACHER, JEANNA MRS.
Address: 5183 NW 59 WAY
City-St-Zip: CORAL SPRINGS, FL 33067

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 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: DOUG BETLACH

PRES

04/10/2006

Electronic Signature of Signing Officer or Director

Date