2008 NOT-FOR-PROFIT CORPORATION

Jan 14, 2008 8:00 am ANNUAL REPORT **Secretary of State DOCUMENT #733441** 01-14-2008 90095 039 ****61.25 1. Entity Name MARĆO LUTHERAN CHURCH, INC. OF MARCO ISLAND Principal Place of Business Mailing Address 40003030 525 N COLLIER BLVD 525 N COLLIER BLVD MARCO ISLAND, FL 34145 US MARCO ISLAND, FL 34145 US 3. Mailing Address 2. Principal Place of Business - No P.O. Box # Suite, Apt. #, etc. Suite, Apt. #, etc. 01062008 CR2E037 (12/06) 4. FEI Number 59-6561840 City & State Applied For City & State Not Applicable Zip Country \$8.75 Additional Country 5. Certificate of Status Desired 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent GREUSEL, JAMIE Street Address (P.O. Box Number is Not Acceptable) **364 BALI** MARCO ISLAND, FL 34145 Zip Code FL 8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable Make check payable to 9. Election Campaign Financing Filing Fee is \$61.25 \$5.00 May Be Florida Department of State Trust Fund Contribution. Added to Fees Due by May 1, 2008 OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 11. 10. SD ☐ Delete TITLE Change ☐ Addition TITLE HEIDE, SUSAN NAME NAME 8355 WHISPER TRACE WAY SUITE 204 STREET ADDRESS STREET ADDRESS NAPLES, FL 34114 CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE ☐ Channe ☐ Addition TITLE NAME GROENKE, RONALD NAME STREET ADDRESS **529 TIGERTAIL COURT** STREET ADDRESS MARCO ISLAND, FL 34145 CITY-ST-ZIP CITY-ST-ZIP Addition ☐ Change Delete TITLE HASTINGS, ROBERT NAME LUNDQUEST, STEVE 1521 JAMA'ICA CT NAME STREET ADDRESS 882 MAGNOLIA CT STREET ADDRESS MARIO ISLAND FL CITY-ST-ZIP CITY-ST-ZIP MARCO ISLAND, FL 34145 ☐ Addition VD Delete TITLE TITLE LUNDQUEST. STEVE PLATH. KARL NAME NAME 220 S, COLLIER BLUD # YOL 1521 JAMAICA CT STREET ADDRESS STREET ADDRESS MARÇO ISLAND, FL 34145 CITY-ST-ZIF CITY-ST-ZIP MARCO ISLAND ☐ Addition TITLE ☐ Delete TITLE ☐ Change NAME NAME STREET ADORESS STREET ADORESS CITY-ST-7IP CITY-ST-ZIP

12. Thereby certify that the information supplied with this filling does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other

CITY-ST-ZIP

TITLE

NAME STREET ADDRESS

SIGNATURE:

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Delete

GROENKE KONALO

FILED

☐ Change · ☐ Addition