# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**
**Feb 10, 2009**
**Secretary of State**

DOCUMENT# 746066

**Entity Name:** THE LORD OF LIFE LUTHERAN CHURCH, INC.

**Current Principal Place of Business:**

9225 SW 137TH AVE
MIAMI, FL 33186

**New Principal Place of Business:**

**Current Mailing Address:**

9225 SW 137TH AVE
MIAMI, FL 33186

**New Mailing Address:**

**FEI Number: 59-1885174** **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

ELLZEY, RANDALL C
12141 SW 120 AVE
MIAMI, FL 33186 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: P ( ) Delete
Name: ELLZEY, RANDALL C
Address: 12141 SW 120 AVE
City-St-Zip: MIAMI, FL 33186

Title: T ( ) Delete
Name: BLAUCH, MAURICE W
Address: 11025 SW 139 CT
City-St-Zip: MIAMI, FL 33186

Title: S ( ) Delete
Name: GALAN, ELSPETH R
Address: 9805 SW 132 COURT
City-St-Zip: MIAMI, FL 33186

Title: VP ( ) Delete
Name: SANDOVAL, ADAN H
Address: 14384 SW 159 TERR
City-St-Zip: MIAMI, FL 33177

**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: ELSPETH ROBERTA GALAN S 02/10/2009

Electronic Signature of Signing Officer or Director Date