2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Mar 12, 2008 8:00 am
Secretary of State
03-12-2008 90025 029 ****61.25

DOCUMENT # 749265

1. Entity Name

SHEPHERD OF THE HILLS LUTHERAN CHURCH, INC.

Principal Place of Business	Mailing Address
37015 ORANGE VALLEY LANE DADE CITY FL 33525	37015 ORANGE VALLEY LANE DADE CITY FL 33525

1st MOORE CR2E037 (10/07)

2. Principal Place of Business - No P.O. Box #	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

4. FEI Number 59-1908856 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

ROTHGEB, CAROL M
6920 OAK CREST WAY
ZEPHYRHILLS FL 33542

7. Name and Address of New Registered Agent

Name: Linda Bartle
Street Address (P.O. Box Number is Not Acceptable): 4603 Autumn Palm Dr.
City: Zephyrhills **FL** Zip Code: 33542

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: Linda Bartle — Linda Bartle — 2-29-08
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW: FEE IS $61.25
Due By May 1, 2008

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

Make Check Payable to Florida Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD THIES, JACK 13213 PALMILLA CIR DADE CITY FL 33525	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VD WEIL, PAUL F 6026 ZEPHYR RIDGE DR. ZEPHYRHILLS FL 33542	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VD BORTON, EDWIN 13246 LEGENDS TRAIL DADE CITY, FL 33525 ☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD SEMANCO, SELENA 38744 MARGS CT ZEPHYRHILLS FL 33540	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD HATFIELD, CAROL 37345 VERO LANE DADE CITY, FL 33525 ☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD ROTHGEB, CAROL M 6920 OAK CREST WAY ZEPHYRHILLS FL 33542	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD BARTLE, LINDA 4603 Autumn Palm Dr. Zephyrhills, Fl. 33542 ☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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 like empowered.

SIGNATURE: Linda Bartle, Linda Bartle — 2-29-08 — 813-788-5363