

# **2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 769113

**FILED**  
**Apr 24, 2011**  
**Secretary of State**

**Entity Name:** SOUTHERN LUTHERAN ACADEMY ASSOCIATION, INC.

**Current Principal Place of Business:**

992 CHASE HAMMOCK ROAD  
MERRITT ISLAND, FL 329537703 US

**New Principal Place of Business:**

**Current Mailing Address:**

992 CHASE HAMMOCK ROAD  
MERRITT ISLAND, FL 329537703 US

**New Mailing Address:**

**FEI Number:** 59-2351378

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

WICHMANN, LEON  
992 CHASE HAMMOCK RD.  
MERRITT ISLAND, FL 32953 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: PD  
Name: LEMKE, PAUL  
Address: 777 SE 58TH AVENUE  
City-St-Zip: OCALA, FL 34471 35

Title: SD  
Name: NATHAN, NOLTE  
Address: 1611 30TH AVE. W  
City-St-Zip: BRADENTON, FL 34205

Title: TD  
Name: WICHMANN, LEON  
Address: 992 CHASE HAMMOCK ROAD  
City-St-Zip: MERRITT ISLAND, FL 329537703

I hereby 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 all other like empowered.

SIGNATURE: LEON WICHMANN

TREA

04/24/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date