2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#770373

FILED Jan 17, 2005 Secretary of State

Entity Name: GRACE LUTHERAN CHURCH OF FORT MYERS SHORES, FORT MYERS, FLORIDA, INC.

Current Principal Place of Business: New Principal Place of Business:

14531 OLD OLGA ROAD FORT MYERS, FL 33905 US

Current Mailing Address: New Mailing Address:

US

14531 OLD OLGA ROAD FORT MYERS, FL 33905

FEI Number: 59-2370291 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

HARDER, THOMAS J
2101 ST CROIX AVE
1 HARDER, THOMAS J
2107 ST CROIX AVE
FT MYERS, FL 33905 US

FT MYERS, FL 33905 US

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: 01/17/2005

Electronic Signature of Registered Agent Date

City-St-Zip:

OFFICERS AND DIRECTORS:

FORT MYERS, FL 33905

City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D () Delete Title: PR (X) Change () Addition

 Name:
 HARDER, THOMAS
 Name:
 HARDER, THOMAS

 Address:
 2101 ST. CROIX
 Address:
 2107 ST. CROIX AVE

 City-St-Zip:
 LEHIGH ACRES, FL 33905
 City-St-Zip:
 FORT MYERS, FL 33905

Title: () Delete Title: VP\D (X) Change () Addition MCWILLIAMS, R.L. Name: KUHN, RICHARD Name: Address: 13855 SLEEPY HOLLOW Address: 2956 RENEE COURT City-St-Zip: FORT MYERS, FL 33095 City-St-Zip: FORT MYERS, FL 33095

Title: S () Delete Title: () Change () Addition

 Title:
 S
 () Delete
 Title:
 () Char

 Name:
 KUHN, MARLENE
 Name:

 Address:
 2956 RENEE COURT
 Address:

Title: TR () Delete Title: TR (X) Change () Addition Name: KIRSCH, JEFF Name: CHAPMAN, LAURA

 Name:
 KIRSCH, JEFF
 Name:
 CHAPMAN, LAURA

 Address:
 15817 KEYGRASS LN
 Address:
 1009 HIBISCUS AVE

 City-St-Zip:
 FORT MYERS, FL 33905
 City-St-Zip:
 LEHIGH ACRES, FL 33936

Title: TR () Delete Title: D (X) Change () Addition

 Name:
 CHAPMAN, GEORGE
 Name:
 CHAPMAN, GEORGE

 Address:
 1009 HIBISCUS AVE
 Address:
 1009 HIBISCUS AVE

 City-St-Zip:
 LEHIGH, FL 33936
 City-St-Zip:
 LEHIGH, FL 33936

Title: PD () Delete Title: D (X) Change () Addition

 Name:
 CHAPMAN, LAURA
 Name:
 MUELLER, RON

 Address:
 1009 HIBISCUS AVE
 Address:
 9822 CREEKDDWOOD LN

 City-St-Zip:
 LEHIGH, FL 33936
 City-St-Zip:
 FORT MYERS, FL 33905

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: THOMAS J. HARDER PRES 01/17/2005