

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 810831

FILED
Apr 11, 2012
Secretary of State

Entity Name: THRIVENT FINANCIAL FOR LUTHERANS

Current Principal Place of Business:

4321 N. BALLARD ROAD
APPLETON, WI 54919

New Principal Place of Business:

Current Mailing Address:

625 FOURTH AVENUE SOUTH
MINNEAPOLIS, MN 55445

New Mailing Address:

FEI Number: 39-0123480

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CHIEF FINANCIAL OFFICER
P.O. BOX 6200 32314-6200
200N E. GAINES ST.
TALLAHASSEE, FL 32399 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: EVP
Name: THOMSEN, JAMES A
Address: 625 4TH AVE S
City-St-Zip: MINNEAPOLIS, MN 55415

Title: CFO
Name: BOUSHEK, RANDALL L
Address: 625 4TH AVE S
City-St-Zip: MINNEAPOLIS, MN 55415

Title: PCEO
Name: HEWITT, BRADFORD L
Address: 625 FOURTH AVE SOUTH
City-St-Zip: MINNEAPOLIS, MN 55415

Title: T
Name: ZASTROW, PAUL B
Address: 625 FOURTH AVE SOUTH
City-St-Zip: MINNEAPOLIS, MN 55415

Title: SVP
Name: RASMUSSEN, TERESA J
Address: 625 FOURTH AVE SOUTH
City-St-Zip: MINNEAPOLIS, MN 55415

Title: EVP
Name: MORET, PAMELA J
Address: 625 FOURTH AVE SOUTH
City-St-Zip: MINNEAPOLIS, MN 55415

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: PAUL B ZASTROW

T

04/11/2012

Electronic Signature of Signing Officer or Director

Date