

**2002 UNIFORM BUSINESS REPORT (UBR)**

**FILED**  
**Feb 11, 2002 8:00 am**  
**Secretary of State**

02-11-2002 90111 031 \*\*\*\*61.25

**DOCUMENT # 827304**

1. Entity Name  
**THE EVANGELICAL LUTHERAN GOOD SAMARITAN SOCIETY**

|   |  |
|---|--|
| Principal Place of Business<br><b>4800 WEST 57TH STREET<br/>         SIOUX FALLS SD 57106<br/>         US</b> | Mailing Address<br><b>P.O. BOX 5038<br/>         SIOUX FALLS SD 57117-5038<br/>         US</b> |
|---|--|

2. Principal Place of Business *non profit* 3. Mailing Address

Suite, Apt. #, etc. Suite, Apt. #, etc.

City & State City & State

Zip Country Zip Country

4. FEI Number **45-0228055** Applied For Not Applicable

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

6. Name and Address of Current Registered Agent  
**CT CORPORATION SYSTEM  
 1200 S. PINE ISLAND ROAD  
 PLANTATION FL 33324**

7. Name and Address of New Registered Agent  
 Name \_\_\_\_\_  
 Street Address (P.O. Box Number is Not Acceptable) \_\_\_\_\_  
 City **FL** Zip Code \_\_\_\_\_

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.

SIGNATURE \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

**FILE NOW: FEE IS \$61.25** 9. Election Campaign Financing Trust Fund Contribution.  **\$5.00 May Be Added to Fees** **Make Check Payable to Department of State**

| 10. OFFICERS AND DIRECTORS                     |  |
|--|--|
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | <b>P</b><br><b>RYAN, JUDITH A</b><br><b>4800 W 57TH ST</b><br><b>SIOUX FALLS SD 57106</b> <input type="checkbox"/> Delete            |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | <b>T</b><br><b>HOLDHUSEN, DAN</b><br><b>480 WEST 57TH STREET</b><br><b>SIOUX FALLS SD</b> <input checked="" type="checkbox"/> Delete |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | <input type="checkbox"/> Delete  |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | <input type="checkbox"/> Delete  |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | <input type="checkbox"/> Delete  |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | <input type="checkbox"/> Delete  |

| 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 |   |
|---|---|
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP        | <input type="checkbox"/> Change <input type="checkbox"/> Addition   |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP        | <b>T</b><br><b>Raye Nae Nylander</b><br><b>4800 West 57th St</b><br><b>SIOUX FALLS, SD 57106</b> <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition     |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP        | <b>V</b><br><b>David J. Horazdovsky</b><br><b>4800 West 57th St.</b><br><b>SIOUX FALLS, SD 57106</b> <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP        | <b>S</b><br><b>Sylvia Gause</b><br><b>4800 West 57th St.</b><br><b>SIOUX FALLS, SD 57106</b> <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition         |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP        | <input type="checkbox"/> Change <input type="checkbox"/> Addition<br><b>See attached list.</b>  |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP        | <input type="checkbox"/> Change <input type="checkbox"/> Addition   |

12. I hereby certify that the information supplied with this filing does not qualify 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 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: *Judith A. Ryan* **SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR** **1-23-02** **605-362-3100**  
 Date Daytime Phone #

CR2E037 (9/01)

THE EVANGELICAL LUTHERAN



Good Samaritan Society

In Christ's Love, Everyone Is Someone.

Attachments Document # 827304

4800 West 57th Street  
PO Box 5038  
Sioux Falls, SD 57117-5038

605-362-3100 phone  
605-362-3347 fax  
www.good-sam.com

### BOARD OF DIRECTORS

|  |  |
|--|--|
| <b>Chairperson</b>                               | Dr. Edward A. Lindell<br>6640 Brittany Road; Edina, MN 55435                                     |
| <b>First Vice<br/>Chairperson</b>                | Clayton E. Jensen, M.D.<br>2932 Maple Street, N.E.; Fargo, ND 58102                              |
| <b>Member-Executive<br/>Committee</b>            | Rev. Karen E. Geisendorfer-Lindgren<br>14919 94 <sup>th</sup> Place North; Maple Grove, MN 55369 |
| <b>Member-Executive<br/>Committee</b>            | Dr. Derrell W. Bulls<br>1428 Windsor; Denton, TX 76209   |
| <b>President and Chief<br/>Executive Officer</b> | Dr. Judith A. Ryan<br>2626 East Regency Court; Sioux Falls, SD 57105                             |
|  | Mr. Mark A. Anderson<br>421 Vine Avenue; Albert Lea, MN 56007                                    |
|  | Mr. Paul R. Binder<br>2077 Roselawn Ave. West; Roseville, MN 55113                               |
|  | Mrs. Susan E. Bittel<br>109 West 10 <sup>th</sup> Street; Hays, KS 67601                         |
|  | Mr. David F. Boock<br>10333 N. Coral Hill Road; Ephraim, WI 54211                                |
|  | Mrs. Bonnie L. Brown<br>3219 Stratford Hall Ct.; Las Vegas, NV 89135                             |
|  | Ms. Kathleen A. Decker<br>1707 East 63 <sup>rd</sup> Street; Sioux Falls, SD 57108               |
|  | Mr. Arthur H. Hess<br>2759 West 25th Street; Greeley, CO 80631                                   |
|  | Rev. John A. Hoeger<br>3401 Cafe Court; Kissimmee, FL 34746                                      |
|  | Mrs. Paula Kneisl<br>484 Miracle Rider Rd.; Prescott, AZ 86301                                   |
|  | Mrs. Jane M. Strommen<br>2161 155 <sup>th</sup> Ave. S.E.; Arthur, ND 58006                      |
|  | Mr. Dwight A. Wuenschel<br>5001 W. Baywood Street; Boise, ID 83703                               |

3/15/20

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605-362-3309 fax  
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311520

**OFFICERS OF THE CORPORATION**

|                                 |                                 |
|---------------------------------|---------------------------------|
| <b>President</b>                | <b>Dr. Judith A. Ryan</b>       |
| <b>Executive Vice President</b> | <b>Mr. David J. Horazdovsky</b> |
| <b>Treasurer</b>                | <b>Mrs. Raye Nae Nylander</b>   |
| <b>Assistant Treasurer</b>      | <b>Mr. Thomas A. Peterson</b>   |
| <b>Secretary</b>                | <b>Mrs. Sylvia Gause</b>        |
| <b>Assistant Secretary</b>      | <b>Mrs. Eloye Farrell</b>       |

(effective 01-01-2002)