2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 14, 2009
Secretary of State

DOCUMENT# 848239

Entity Name: BETHESDA LUTHERAN HOMES AND SERVICES, INC.

Current Principal Place of Business:

600 HOFFMANN DRIVE
WATERTOWN, WI 530946223 US

New Principal Place of Business:

Current Mailing Address:

600 HOFFMANN DRIVE
WATERTOWN, WI 530946223 US

New Mailing Address:

FEI Number: 39-0806446 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 323012525 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:	SECR	( ) Delete
Name:	MAYER, HELEN	
Address:	1527 STATE ROUTE 154	
City-St-Zip:	CUTLER, IL 622381401	
Title:	CHRM	( ) Delete
Name:	LEFEVRE, ED	
Address:	4308 W. DEERMEADOW DRIVE	
City-St-Zip:	PEORIA, IL 61615	
Title:	TRSR	( ) Delete
Name:	NEUMANN, DANIEL	
Address:	719 WEXFORD WAY	
City-St-Zip:	HARTLAND, WI 53029	
Title:	PRES	( ) Delete
Name:	BAUER, JOHN E	
Address:	600 HOFFMANN DR	
City-St-Zip:	WATERTOWN, WI 530946223	
Title:	VCHR	( ) Delete
Name:	ULMER, ROBERT G	
Address:	21300 WEST 106TH ST	
City-St-Zip:	OLATHE, KS 66061	
Title:	VP	( ) Delete
Name:	KACZMARSKI, JEFFREY A	
Address:	600 HOFFMANN DR	
City-St-Zip:	WATERTOWN, WI 530946223	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:	VCHR	(X) Change ( ) Addition
Name:	SCHWARTZ, ARVID W	
Address:	18600 391ST AVENUE	
City-St-Zip:	GREEN ISLE, MN 55338	
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: JEFFREY A. KACZMARSKI VP 04/14/2009

Electronic Signature of Signing Officer or Director — Date