2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# C10010

FILED Jul 01, 2005 Secretary of State

Entity Name: ABIDING SAVIOR LUTHERAN CHURCH OF FORT LAUDERDALE, FLORIDA

Current Principal Place of Business: New Principal Place of Business: 1900 SOUTHWEST 35TH AVENUE FT. LAUDERDALE, FL 33312

1900 SOUTHWEST 35TH AVENUE FT. LAUDERDALE, FL 33312

Current Mailing Address:

FEI Number: 59-1918819 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

New Mailing Address:

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

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

MEADE, BARBARA MEADE, BARBARA 1243 S.W. 29TH TERRACE 1900 SW 35TH AVENUE

US FT. LAUDERDALE, FL 33312 US FT. LAUDERDALE, FL 33312

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: 07/01/2005

> Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Delete (X) Change () Addition

MEADE, BARBARA MEADE, BARBARA Name: Name: 1243 SW 29 TERR Address: 1900 SW 35TH AVENUE Address: City-St-Zip: FORT LAUDERDALE, FL 33312 City-St-Zip: FORT LAUDERDALE, FL 33312

Title: Title: () Change () Addition

() Delete SCOTT, MIKE Name: Name: Address: 5350 NW 77 CT Address: City-St-Zip: POMPANO BEACH, FL 33073 City-St-Zip:

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

MASSA, DOREEN Name: Name: 7810 NW 47 CT Address: Address: City-St-Zip: LAUDERHILL, FL 33351 City-St-Zip:

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

Name: SUAREZ, ROGER Name: 3549 SW 16 COURT Address: Address: FORT LAUDERDALE, FL 33312 City-St-Zip: City-St-Zip:

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

WING, HELEN Name: Name: 450 NW 88 TERR 101 Address: Address: FORT LAUDERDALE, FL 33324 City-St-Zip: City-St-Zip:

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: BARBARA MEADE PD 07/01/2005