

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F05000003207

FILED
Jul 06, 2006
Secretary of State

Entity Name: LUTHERAN COMMUNITY FOUNDATION CORPORATION

Current Principal Place of Business:

625 4TH AVENUE SOUTH, SUITE 200
MINNEAPOLIS, MN 55410

New Principal Place of Business:

Current Mailing Address:

625 4TH AVENUE SOUTH, SUITE 200
MINNEAPOLIS, MN 55410

New Mailing Address:

FEI Number: 41-1802412 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
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:

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: C () Delete
Name: GREEN, BOB
Address: 31013 LA QUINTA STREET
City-St-Zip: GEORGETOWN, TX 78628

Title: VC () Delete
Name: BRAATEN, JENNIFER
Address: FERRUM COLLEGE 215 FERRUM MT. ROAD
City-St-Zip: FERRUM, VA 24088

Title: D () Delete
Name: MILLER, LYLE REV.
Address: ELCA 116 POINT FOSDICK CIRCLE
City-St-Zip: GIG HARBOR, WA 98335

Title: D (X) Delete
Name: BAERWALD, KATHRYN ESQ.
Address: GEORGETOWN UNIVERSITY 202 HEALY HALL
City-St-Zip: WASHINGTON, DC 20057

Title: P () Delete
Name: ANDERSEN, CHRIS
Address: 625 4TH AVENUE SOUTH, SUITE 200
City-St-Zip: MINNEAPOLIS, MN 55410

Title: VP () Delete
Name: NELSON, CURT
Address: 625 4TH AVENUE S. #200
City-St-Zip: MINNEAPOLIS, MN 55415

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VP (X) Change () Addition
Name: GRASMOEN, CHERYL
Address: 625 FOURTH AVE S. SUITE 200
City-St-Zip: MINNEAPOLIS, MN 55415

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VP (X) Change () Addition
Name: PETERSON, TOM
Address: 625 4TH AVENUE S. #200
City-St-Zip: MINNEAPOLIS, MN 55415

I hereby certify that the information supplied with this filing does not qualify for the 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: TOM PETERSON

VP

07/06/2006

Electronic Signature of Signing Officer or Director

Date