

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F08000000768

FILED
May 15, 2009
Secretary of State

Entity Name: LUTHERAN IMMIGRATION AND REFUGEE SERVICE CORPORATION

Current Principal Place of Business:

1800 SW 1ST STREET
SUITE 206
MIAMI, FL 33135

New Principal Place of Business:

6303 BLUE LAGOON DRIVE
SUITE 400
MIAMI, FL 33126

Current Mailing Address:

700 LIGHT STREET
BALTIMORE, MD 21230

New Mailing Address:

FEI Number: 13-2574854 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:

MALEBRANCHE, YASMINE
1800 SW 1ST STREET
SUITE 206
MIAMI, FL 33135 US

Name and Address of New Registered Agent:

PERALTA, ALEXANDRA
144 NORTHEAST 91ST STREET
MIAMI, FL 33138 US

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: ALEXANDRA PERALTA

05/15/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: DEFFENBAUGH, RALSTON
Address: 5155 DARTING BIRD LANE
City-St-Zip: COLUMBIA, MD 21044

Title: V () Delete
Name: ANTHON, JANE
Address: 5 KILLADOON COURT
City-St-Zip: TIMONIUM, MD 21093

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change () Addition
Name: DEFFENBAUGH, RALSTON
Address: 5155 DARTING BIRD LANE
City-St-Zip: COLUMBIA, MD 21044

Title: VP (X) Change () Addition
Name: ANTHON, JANE
Address: 5 KILLADOON COURT
City-St-Zip: TIMONIUM, MD 21093

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: JANE ANTHON

VP

05/15/2009

Electronic Signature of Signing Officer or Director

Date