2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F96000002726

FILED Apr 14, 2009 Secretary of State

Entity Name: LUTHERANS IN JEWISH EVANGELISM, INC.

	rincipal Place of Business:	New Principal Place	e of Business:	
	ETARY DR. D, FL 32809			
urrent M	ailing Address:	New Mailing Addres	ss:	
	ETARY DR. D, FL 32809			
El Number:	93-0810456 FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired (X)	
ame and	Address of Current Registered Agent:	Name and Address	of New Registered Agent:	
207 MÓN	RUCE J REV. ETARY DR.), FL 32809 US			
	named entity submits this statement for the of Florida.	e purpose of changing its registere	ed office or registered agent, or both	
IGNATUF	RE:			
	Electronic Signature of Registered	Agent	Date	
OFFICERS AND DIRECTORS:		ADDITIONS/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTO	
tle: ame: ddress: ity-St-Zip:	SD () Delete TEMPLE, MARY LOU 30695 OAK LEAF LANE FRANKLIN, MI 48025	Title: Name: Address: City-St-Zip:	() Change () Addition	
		Title:	() Observe () A LEG	
tle: ame: ddress: ity-St-Zip:	CD () Delete LINEBERGER PO BOX 99 OCKLAWAHA, FL 32183	Name: Address: City-St-Zip:	()Change ()Addition	
ame: ddress: ty-St-Zip: tle: ame: ddress:	LINEBERGER PO BOX 99	Name: Address:	() Change () Addition	
ame: Idress:	LINEBERGER PO BOX 99 OCKLAWAHA, FL 32183 D () Delete PARVIZ, KEVIN 6603 WISE AVE	Name: Address: City-St-Zip: Title: Name: Address:		
ame: ddress: ty-St-Zip: ttle: ame: ddress: ty-St-Zip: ttle: ame: ddress:	LINEBERGER PO BOX 99 OCKLAWAHA, FL 32183 D () Delete PARVIZ, KEVIN 6603 WISE AVE SAINT LOUIS, MO 63139 MD () Delete LIESKE, BRUCE 1826 SENECA BLVD.	Name: Address: City-St-Zip: Title: Name: Address: City-St-Zip: Title: Name: Address:	() Change() Addition	

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: BRUCE J. LIESKE REV. 04/14/2009