

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F96000002726

FILED  
Feb 15, 2012  
Secretary of State

**Entity Name:** LUTHERANS IN JEWISH EVANGELISM, INC.

**Current Principal Place of Business:**

7207 MONETARY DR.  
ORLANDO, FL 32809

**New Principal Place of Business:**

**Current Mailing Address:**

7207 MONETARY DR.  
ORLANDO, FL 32809

**New Mailing Address:**

**FEI Number:** 93-0810456

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

LIESKE, BRUCE J REV.  
7207 MONETARY DR.  
ORLANDO, FL 32809 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: SD  
Name: TEMPLE, MARY LOU  
Address: 30695 OAK LEAF LANE  
City-St-Zip: FRANKLIN, MI 48025

Title: CD  
Name: LINEBERGER  
Address: PO BOX 99  
City-St-Zip: OCKLAWAHA, FL 32183

Title: D  
Name: PARVIZ, KEVIN  
Address: 6603 WISE AVE  
City-St-Zip: SAINT LOUIS, MO 63139

Title: MD  
Name: LIESKE, BRUCE  
Address: 1826 SENECA BLVD.  
City-St-Zip: WINTER SPRINGS, FL 32708

Title: TD  
Name: HALL, SUZANNE  
Address: 11095 BUSCH RD  
City-St-Zip: BIRCH RUN, MI 48415

I hereby 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 all other like empowered.

SIGNATURE: REV. BRUCE J. LIESKE

MD

02/15/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date