2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# K43020

FILED Feb 22, 2008 Secretary of State

Entity Name: BETHLEHEM LUTHERAN PRESCHOOL, INC.

Current P	rincipal Plac	e of Business:	New Principal Place	e of Business:
	HTH AVENUE IVILLE BEACI			
Current Mailing Address:		New Mailing Addres	New Mailing Address:	
	HTH AVENUE IVILLE BEACI			
El Number	: 59-2739956	FEI Number Applied For()	FEI Number Not Applicable ()	Certificate of Status Desired ()
Name and	d Address of	Current Registered Agent:	Name and Address	of New Registered Agent:
2759 CAŃ	DANA A RE\ IYON FALLS [IVILLE, FL 32	DRIVE		
,, (01(00)	11122, 12 02			
The above	,		purpose of changing its registere	ed office or registered agent, or both,
The above n the State	e named entity e of Florida		purpose of changing its registere	ed office or registered agent, or both,
Γhe above n the State	e named entity e of Florida. RE:			ed office or registered agent, or both, Date
The above n the State	e named entity e of Florida. RE:Electro	submits this statement for the		
The above n the Stati BIGNATUI	e named entity e of Florida. RE:Electro	submits this statement for the nic Signature of Registered Ag	ent	
The above n the State SIGNATUING CARREST CARRE	e named entity e of Florida. RE: Electro mpaign Financii S AND DIREC O (BRONES, DAI	submits this statement for the onic Signature of Registered Aging Trust Fund Contribution (). CTORS:) Delete NA A REV. N FALLS DRIVE	ent	Date
The above n the Stati BIGNATUI	e named entity e of Florida. RE: Electro mpaign Financia S AND DIRECT O (BRONES, DAI 2759 CANYOI JACKSONVILI D (CORBITT, WI 2025 9TH AVE	submits this statement for the onic Signature of Registered Aging Trust Fund Contribution (). CTORS:) Delete NA A REV. N FALLS DRIVE LE, FL 32224) Delete LMA	ADDITIONS/CHANG Title: Name: Address:	Date BES TO OFFICERS AND DIRECTOR

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: TERESA KAY HAWKINS DIRE 02/22/2008