## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N01000004988

FILED Jan 05, 2009 Secretary of State

Entity Name: THE FAITH LUTHERAN CHURCH OF HIALEAH, FLORIDA, INC.

**Current Principal Place of Business: New Principal Place of Business:** 293 HIALEAH DRIVE HIALEAH, FL 33010 **Current Mailing Address: New Mailing Address:** 293 HIALEAH DRIVE HIALEAH, FL 33010 FEI Number: 59-0760200 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: WESSLING, MARK A 293 HIALEAH DRIVE HIALEAH, FL 33010 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: Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: (X) Change ( ) Addition ( ) Delete WESSLING, MARK A WESSLING, MARK A Name: Name: 215 LENAPE DR Address: 215 LENAPE DR Address: City-St-Zip: MIAMI, FL 33166 City-St-Zip: MIAMI SPRINGS, FL 33166 Title: () Delete Title: () Change () Addition RAMIREZ, HECTOR Name: Name: Address: 570 FORREST DR Address: City-St-Zip: MIAMI SPRINGS, FL 33166 City-St-Zip: Title: () Delete Title: () Change () Addition GLIENKE, HERMAN J Name: Name: Address: 1701 APACHE ST Address: City-St-Zip: MIAMI SPRINGS, FL 33166 City-St-Zip: Title: ( ) Delete Title: () Change () Addition Name: KOCIUBA, JOSEPH Name: 1720 S. TREASURE DR Address: Address: City-St-Zip: MIAMI, FL 33141 City-St-Zip: Title: VΡ () Delete Title: () Change () Addition OROZCO, ENRIQUE Name: Name: 596 W 65 DR Address: Address: City-St-Zip: HIALEAH, FL 33012 City-St-Zip: Title: () Delete Title: (X) Change ( ) Addition DROZO, OTTO DROZO, OTTO Name: Name: Address: 4664 SW 132 AVE Address: 4664 SW 132 AVE HOLLYWOOD, FL 33027 MIRAMAR, FL 33027 City-St-Zip: City-St-Zip:

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: MARK A. WESSLING REV. 01/05/2009