

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000007206

FILED
Apr 26, 2009
Secretary of State

Entity Name: LIVING FAITH LUTHERAN CHURCH, INC.

Current Principal Place of Business:

18500 NW 9 STREET
PEMBROKE PINES, FL 33029

New Principal Place of Business:

Current Mailing Address:

18500 NW 9 STREET
PEMBROKE PINES, FL 33029

New Mailing Address:

FEI Number: 65-0868759

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FITZGERALD, PATRICIA
16410 DIAMOND PLACE
WESTON, FL 33331 US

Name and Address of New Registered Agent:

HENRY, DON
4451 FOXTAIL LANE
WESTON, FL 33331 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: DON HENRY

04/26/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: FITZGERALD, PATRICIA
Address: 16410 DIAMOND PLACE
City-St-Zip: WESTON, FL 33331 US

Title: S () Delete
Name: KOCH, GISELA
Address: 16066 NW 22 STREET
City-St-Zip: PEMBROKE PINES, FL 33028 US

Title: T () Delete
Name: BELZ, KAREN
Address: 1438 SW 157 AVENUE
City-St-Zip: PEMBROKE PINES, FL 33027 US

Title: V () Delete
Name: HENRY, DONALD
Address: 4451 FOXTAIL LANE
City-St-Zip: WESTON, FL 33331

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: HENRY, DON
Address: 4451 FOXTAIL LANE
City-St-Zip: WESTON, FL 33331 US

Title: S (X) Change () Addition
Name: MUNSIE, RICHARD
Address: 815 S.W. 191 AVENUE
City-St-Zip: PEMBROKE PINES, FL 33029 US

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: V (X) Change () Addition
Name: KRAUSE, CHERYL
Address: 18354 NW 12 STREET
City-St-Zip: PEMBROKE PINES, FL 33029

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: RICHARD MUNSIE

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04/26/2009

Electronic Signature of Signing Officer or Director

Date