2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000010158

Entity Name: SPIRIT OF LIFE LUTHERAN CHURCH, INC.

FILED Apr 21, 2008 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:

604-7 NEW BERLIN ROAD JACKSONVILLE, FL 32218

Current Mailing Address: New Mailing Address:

604-7 NEW BERLIN ROAD JACKSONVILLE, FL 32218

FEI Number: 03-0395711 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:

WILSON, BEN P 604-7 NEW BERLIN ROAD JACKSONVILLE, FL 32218 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:

itle: P () Delete Title: P (X) Change () Addition

 Name:
 SPELLMAN, PAUL
 Name:
 BECK, TOM

 Address:
 1250 GUN LEAF ROAD
 Address:
 11223 VERA DRIVE

 City-St-Zip:
 JACKSONVILLE, FL 32226
 City-St-Zip:
 JACKSONVILLE, FL 32218

Title: V.P. () Delete Title: V.P. (X) Change () Addition

 Name:
 BECK, TOM
 Name:
 BREWER, BILL

 Address:
 11223 VERA DRIVE
 Address:
 3310 CAPPER ROAD

 City-St-Zip:
 JACKSONVILLE, FL 32218
 City-St-Zip:
 JACKSONVILLE, FL 32218

Title: TREA () Delete Title: SEC (X) Change () Addition

Name: MALLARD, BETTY Name: PAULSEN, STEVE

 Address:
 11432 INEZ DR.
 Address:
 637 TREE SWALLOW COURT

 City-St-Zip:
 JACKSONVILLE, FL 32218
 City-St-Zip:
 JACKSONVILLE, FL 32218

Title: SEC () Delete Title: TREA (X) Change () Addition

Name: PAULSEN, STEVE Name: PAULSEN, STEVE
Address: FOREST CREEK DRIVE Address: 637 TREE SWALLOW COURT

City-St-Zip: JACKSONVILLE, FL 32225 City-St-Zip: JACKSONVILLE, FL 32218

Title: REV () Delete Title: () Change () Addition

 Name:
 CROSS, ELLEN S
 Name:

 Address:
 8745 BURKHALL ST
 Address:

 City-St-Zip:
 JACKSONVILLE, FL 32211
 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: BEN P. WILSON R.A. 04/21/2008