

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03667

FILED
Jan 23, 2009
Secretary of State

Entity Name: TRINITY LUTHERAN CHURCH-MISSOURI SYNOD, INC.

Current Principal Place of Business:

706 S W 6TH AVENUE
CAPE CORAL, FL 33991

New Principal Place of Business:

Current Mailing Address:

706 S W 6TH AVENUE
CAPE CORAL, FL 33991

New Mailing Address:

FEI Number: 65-0077535

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MEADOR, NEIL
1316 MORNINGSIDE DRIVE
FORT MYERS, FL 33901 US

Name and Address of New Registered Agent:

KOCH, NEIL
244 SE 46TH TERRACE
CAPE CORAL, FL 33904 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: NEIL KOCH

01/23/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: MEADOR, NEIL
Address: 1316 MORNING SIDE DRIVE
City-St-Zip: FORT MYERS, FL 33901

Title: VD (X) Delete
Name: STAHL, VERNE
Address: 3778 SAN CARLOS DRIVE
City-St-Zip: SAINT JAMES CITY, FL 33956

Title: SD () Delete
Name: DAVIS, JENNIFER
Address: 117 SE 32ND TERRACE
City-St-Zip: CAPE CORAL, FL 33904

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: KOCH, NEIL
Address: 244 SE 46TH TERRACE
City-St-Zip: CAPE CORAL, FL 33904

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

Title: SD (X) Change () Addition
Name: WENDEL, JOAN
Address: 2218 SE 10TH TERRACE
City-St-Zip: CAPE CORAL, FL 33990

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: NEIL KOCH

PD

01/23/2009

Electronic Signature of Signing Officer or Director

Date