

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000001484

FILED
Jan 16, 2008
Secretary of State

Entity Name: DIVINE SAVIOR LUTHERAN ACADEMY, INC.

Current Principal Place of Business:

10311 NW 58TH STREET
DORAL, FL 33178

New Principal Place of Business:

Current Mailing Address:

10311 NW 58TH STREET
DORAL, FL 33178

New Mailing Address:

FEI Number: 20-0834970

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LEYRER, CARL W
9748 NW 32ND STREET
DORAL, FL 33172 US

Name and Address of New Registered Agent:

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:

Title: D () Delete
Name: LEYRER, CARL W
Address: 9748 NW 32ND ST
City-St-Zip: DORAL, FL 331721030 US

Title: D () Delete
Name: RODRIGUEZ LEYRER, CONNIE
Address: 9748 NW 32ND ST
City-St-Zip: DORAL, FL 331721030 US

Title: D () Delete
Name: LEYRER, CARLOS C
Address: 5184 NW 103RD AVENUE
City-St-Zip: DORAL, FL 33178 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: () Change () Addition
Name:
Address:
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: CARL W. LEYRER

REV.

01/16/2008

Electronic Signature of Signing Officer or Director

Date