

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000001484

FILED  
Jan 20, 2009  
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

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

Title: D (X) Change ( ) Addition  
Name: SPIEGELBERG, MARCUS W SECRETA  
Address: 5195 NW 103RD AVENUE  
City-St-Zip: DORAL, FL 33178 US

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

Title: D ( ) Change (X) Addition  
Name: TROGE, BENJAMIN TREASUR  
Address: 4413 NW 97TH PLACE  
City-St-Zip: DORAL, FL 33178 US

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

PRES

01/20/2009

Electronic Signature of Signing Officer or Director

Date