

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000010662

FILED  
Mar 01, 2009  
Secretary of State

**Entity Name:** PEACE LUTHERAN CHURCH OF NAPLES,INC.

**Current Principal Place of Business:**

5659 STRAND CT SUITE 103  
NAPLES, FL 34110

**New Principal Place of Business:**

**Current Mailing Address:**

5659 STRAND CT SUITE 103  
NAPLES, FL 34110

**New Mailing Address:**

**FEI Number:** 02-0733286

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

LIEBICH, DENNIS J REV.  
5010 KINGSTON WAY  
NAPLES, FL 34119 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: P ( ) Delete  
Name: O'DONNELL, STEVE  
Address: 4535 12TH ST NE  
City-St-Zip: NAPLES, FL 34120

Title: VP ( ) Delete  
Name: SCHEUMAN, CARL  
Address: 945 MOON LAKE CIR  
City-St-Zip: NAPLES, FL 34104

Title: T ( ) Delete  
Name: PATE, MARIA  
Address: 14566 INDIGO LAKES CIR  
City-St-Zip: NAPLES, FL 34119

Title: S ( ) Delete  
Name: BECKER, DANA  
Address: 4236 ST GEORGE LANE  
City-St-Zip: NAPLES, FL 34119

**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:

Title: S (X) Change ( ) Addition  
Name: DUCHAM, KELLY  
Address: 640 11TH STREET SW  
City-St-Zip: NAPLES, FL 34117

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: MARIA L PATE

T

03/01/2009

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date