2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 26, 2008
Secretary of State

DOCUMENT# N05000001276

Entity Name: CHRIST LUTHERAN CHURCH OF PALM COAST INC.

Current Principal Place of Business:

2323 NORTH STATE STREET (US 1)
SUITE 112
BUNNELL, FL 32110

New Principal Place of Business:

Current Mailing Address:

2323 NORTH STATE STREET (US 1)
SUITE 112
BUNNEL, FL 32110

New Mailing Address:

FEI Number: 20-2294821 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

JONES, ALBERT F
2323 NORTH STATE STREET
SUITE 112
BUNNELL, FL 32110 US

Name and Address of New Registered Agent:

ROSEVEAR, JAMES
2323 NORTH STATE STREET
SUITE 112
BUNNELL, FL 32110 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: JAMES ROSEVEAR 02/26/2008
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: PD ( ) Delete
Name: JONES, ALBERT F
Address: 2323 NORTH STATE STREET, SUITE 112
City-St-Zip: BUNNELL, FL 32110

Title: VP ( ) Delete
Name: KLINKENBERG, KENNETH
Address: 2323 NORTH STATE STREET, SUITE 112
City-St-Zip: BUNNELL, FL 32110

Title: SD ( ) Delete
Name: HILL, JEAN
Address: 2323 NORTH STATE STREET, SUITE 112
City-St-Zip: BUNNELL, FL 32110

Title: TD ( ) Delete
Name: TEES, MARY
Address: 2323 NORTH STATE STREET
City-St-Zip: BUNNELL, FL 32110

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition
Name: ROSEVEAR, JAMES
Address: 2323 NORTH STATE STREET, SUITE 112
City-St-Zip: BUNNELL, FL 32110

Title: VP (X) Change ( ) Addition
Name: REHME, ART
Address: 2323 NORTH STATE STREET, SUITE 112
City-St-Zip: BUNNELL, FL 32110

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: JAMES ROSEVEAR PD 02/26/2008
Electronic Signature of Signing Officer or Director Date