

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED
Apr 22, 2009
Secretary of State**

DOCUMENT# N21640

Entity Name: SPIRIT OF JOY LUTHERAN CHURCH, INC.

Current Principal Place of Business:

1801 ROUSE ROAD
ORLANDO, FL 32817 US

New Principal Place of Business:

Current Mailing Address:

1801 ROUSE ROAD
ORLANDO, FL 32817 US

New Mailing Address:

FEI Number: 59-3490645 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LINMAN, JEFFREY V
13739 WATERHOUSE WAY
ORLANDO, FL 32828 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: SD () Delete
Name: RAUE, KENNETH
Address: 13003 MARSH FERN DRIVE
City-St-Zip: ORLANDO, FL 32828 US

Title: PD () Delete
Name: CONNORS, ERIN
Address: 1018 OCEANBREEZE CT.
City-St-Zip: ORLANDO, FL 32828 US

Title: TD () Delete
Name: HUSTON, DEREK
Address: 426 POPLAR COURT
City-St-Zip: MAITLAND, FL 32751 US

Title: VPD () Delete
Name: BODKIN, MICHAEL
Address: 14421 LAKE UNDERHILL ROAD
City-St-Zip: ORLANDO, FL 32828 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: TD (X) Change () Addition
Name: TRITINGER, SUSAN
Address: 14500 RIVIERA POINTE DRIVE
City-St-Zip: ORLANDO, FL 32828 US

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: ERIN CONNORS

PD

04/22/2009

Electronic Signature of Signing Officer or Director

Date