

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N31052

FILED
Jan 15, 2008
Secretary of State

Entity Name: LUTHERAN SOCIAL SERVICES OF NORTH FLORIDA, INC.

Current Principal Place of Business:

606 W 4TH AVENUE
SUITE 11
TALLAHASSEE, FL 323036016

New Principal Place of Business:

Current Mailing Address:

606 W 4TH AVENUE
SUITE 11
TALLAHASSEE, FL 323036016 US

New Mailing Address:

606 W 4TH AVENUE
SUITE 11
TALLAHASSEE, FL 323036016

FEI Number: 59-2939507

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

FREEMAN, JAMES T
4126 ARKLOW DR
TALLAHASSEE, FL 323092804 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: PD () Delete
Name: BAXLEY, GAIL
Address: 816 MERRITT LANE
City-St-Zip: HAVANA, FL 32333

Title: TD () Delete
Name: TAYLOR, WILLIAM H
Address: 3099 SHAMROCK N
City-St-Zip: TALLAHASSEE, FL 32309

Title: VD () Delete
Name: MILLETT, EMILY
Address: 1104 IVANHOE RD
City-St-Zip: TALLAHASSEE, FL 32312

Title: SD (X) Delete
Name: HAFNER, MARY L
Address: 1107 IVANHOE ROAD
City-St-Zip: TALLAHASSEE, FL 32312

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: MILLETT, EMILY
Address: 1104 IVANHOE RD
City-St-Zip: TALLAHASSEE, FL 32312

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

Title: SD (X) Change () Addition
Name: HAFNER, MARY
Address: 1107 IVANHOE ROAD
City-St-Zip: TALLAHASSEE, FL 32312

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: MARY L HAFNER

TD

01/15/2008

Electronic Signature of Signing Officer or Director

Date