

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N31052

FILED
Jan 19, 2010
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

New Mailing Address:

FEI Number: 59-2939507

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

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

Name and Address of New Registered Agent:

SANDRIDGE, LEAH D
606 W 4TH AVENUE
SUITE 11
TALLAHASSEE, FL 323036016 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: LEAH D. SANDRIDGE

01/19/2010

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD
Name: MILLETT, EMILY
Address: 1104 IVANHOE RD
City-St-Zip: TALLAHASSEE, FL 32312

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

Title: SD
Name: HAFNER, MARY
Address: 1107 IVANHOE ROAD
City-St-Zip: TALLAHASSEE, FL 32312

I hereby 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 all other like empowered.

SIGNATURE: LEAH D. SANDRIDGE

ED

01/19/2010

Electronic Signature of Signing Officer or Director

Date