

2012 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N31052

FILED
Jan 13, 2012
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 (X)

Name and Address of Current Registered Agent:

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

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PRES
Name: RANZINGER, GARY
Address: 606 W. 4TH AVE., STE. 11
City-St-Zip: TALLAHASSEE, FL 32303

Title: VICE
Name: FRESE, CLAUDIA
Address: 606 W. 4TH AVE., STE. 11
City-St-Zip: TALLAHASSEE, FL 32303

Title: SEC
Name: HAFNER, MARY
Address: 606 W. 4TH AVE., STE. 11
City-St-Zip: TALLAHASSEE, FL 32303

Title: TREA
Name: MILLETT, EMILY
Address: 606 W. 4TH AVE., STE. 11
City-St-Zip: TALLAHASSEE, FL 32303

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

01/13/2012

Electronic Signature of Signing Officer or Director

Date