2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 18, 2009
Secretary of State

DOCUMENT# N38785

Entity Name: CHURCH OF THE LUTHERAN CONFESSION OF NORTH PORT, FLORIDA, INC.

Current Principal Place of Business:

14600 S. TAMIAMI TRAIL
NORTH PORT, FL 34287

New Principal Place of Business:

Current Mailing Address:

14600 S. TAMIAMI TRAIL
NORTH PORT, FL 34287

New Mailing Address:

FEI Number: **FEI Number Applied For ( )** **FEI Number Not Applicable (X)** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

PETERS, ROBERT A
7445 MANASOTA KEY
ENGLEWOOD, FL 34223 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: TD ( ) Delete
Name: PETERS, ROBERT A.,
Address: 7445 MANASOTA KEY
City-St-Zip: ENGLEWOOD, FL

Title: D ( ) Delete
Name: SCHALLER, MARK
Address: 3226 SW 7TH AVE
City-St-Zip: CAPE CORAL, FL 33914

Title: SD (X) Delete
Name: MITCHELL, AUBREY JR
Address: 5977 ESPANOLA AVE
City-St-Zip: N PORT, FL

Title: PD ( ) Delete
Name: EVFOURTH, LYLE
Address: 723 RIVER VIEW CIR
City-St-Zip: NORTH PORT, FL 34287

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: DS (X) Change ( ) Addition
Name: SCHALLER, MARK
Address: 3226 SW 7TH AVE
City-St-Zip: CAPE CORAL, FL 33914

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

Title: PD (X) Change ( ) Addition
Name: ERFOURTH, LYLE
Address: 723 RIVER VIEW CIR
City-St-Zip: NORTH PORT, FL 34287

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: ROBERT A. PETERS TD 01/18/2009

Electronic Signature of Signing Officer or Director — Date