

# **2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N38785

**FILED**  
**Jan 06, 2011**  
**Secretary of State**

**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:** 65-0196034

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**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  
Name: PETERS, ROBERT A.  
Address: 7445 MANASOTA KEY  
City-St-Zip: ENGLEWOOD, FL

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

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

Title: D  
Name: WIER, MARK  
Address: 1326 INNSBRUCK CT.  
City-St-Zip: WINTER HAVEN, FL 33884

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: ROBERT A. PETERS

TD

01/06/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date