2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N50891

FILED Apr 30, 2008 Secretary of State

Entity Name: FAITH LUTHERAN CHURCH LCMS, INC. **Current Principal Place of Business: New Principal Place of Business:** 935 CRYSTAL GLEN DR LECANTO, FL 34461 **Current Mailing Address: New Mailing Address:** 935 S. CRYSTAL GLEN DR LECANTO, FL 34461 FEI Number: 59-3149114 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: HAWKES, PAUL M. MALPHURS, WANDA S. 9731 W DEÉPWOODS DR 7655 W. GULF TO LAKE HWY. US SUITE 13 CRYSTAL RIVER, FL 34428 CRYSTAL RIVER, FL 34429 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: WANDA S MALPHURS 04/30/2008 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition JOHNSON, STEVE Name: Name: Address: 2788 N PRESTWICK WAY Address: City-St-Zip: LECANTO, FL 34461 City-St-Zip: Title: Title: () Delete () Change () Addition Name: RIEDEL, BUD Name: Address: 489 TURKEY PINE LP Address: City-St-Zip: LECANTO, FL 34461 City-St-Zip: Title: () Delete Title: () Change () Addition KING-MALPHURS, WANDAS Name: Name: 9731 W DEEPWOODS DR Address: Address: City-St-Zip: CRYSTAL RIVER, FL 34428 City-St-Zip: Title: FS () Delete Title: () Change () Addition Name: KELLER, MIKE Name: 1979 N EAGLE CHASE DR Address: Address: City-St-Zip: HERNANDO, FL 34442 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: WANDA SUE KING-MALPHURS DT 04/30/2008