2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000000109

FILED Jan 03, 2006 Secretary of State

Entity Name: FAITH "VIERA" LUTHERAN CHURCH, INC.

Current Principal Place of Business: New Principal Place of Business: 5550 FAITH DRIVE **ROCKLEDGE, FL 329556338 Current Mailing Address: New Mailing Address:** 5550 FAITH DRIVE **ROCKLEDGE, FL 329556338** FEI Number: 59-3338895 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: MEYR, RON REV 756 HÁRRIER COURT ROCKLEDGE, FL 32955 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: Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete (X) Change () Addition FREEMAN, RONALD Name: KILLIAN, JAY Name: 6887 BLACKBERRY CT Address: 959 CARRIAGE HILL RD Address: City-St-Zip: MELBOURNE, FL 32940 City-St-Zip: MELBOURNE, FL 32940 Title: () Delete Title: (X) Change () Addition Name: KILLIAN, JAY Name: COOK, CLARENCE Address: 959 CARRIAGE HILL RD Address: 4155 SAN YSIDRO WAY City-St-Zip: MELBOURNE, FL 32940 City-St-Zip: ROCKLEDGE, FL 32955 Title: Title: () Change () Addition () Delete BECK, PAULA Name: Name: 1021 WORTHINGTON SPRINGS DR. Address: Address: City-St-Zip: MELBOURNE, FL 32940 City-St-Zip: Title: () Delete Title: () Change () Addition Name: BALDINI, MARCUS Name: Address: 1075 RED BUD CIRCLE Address: City-St-Zip: ROCKLEDGE, FL 32955 City-St-Zip: Title: () Delete Title: () Change () Addition TUTTLE, WILLIAM Name: Name: 953 BRUMPTOM PL Address: Address: City-St-Zip: VIERA, FL 32955 City-St-Zip: Title: () Delete Title: () Change () Addition CRITTENDEN, ALBERT Name: Name: Address: 2290 GRAND TETON BLVD Address: MELBOURNE, FL 32935 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: JAY KILLIAN PRES 01/03/2006