2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000004360

FILED Mar 02, 2006 Secretary of State

Entity Name: CONCORDIA LUTHERAN MIDDLE SCHOOL, INC.

current P	nimainal Dis	of Business	New Principal Pl	nes of Businesse	
	rincipal Place	of Business:	New Principal Pla	ace of Business:	
5601 HAN TAMPA, F		3			
Current Mailing Address:			New Mailing Add	New Mailing Address:	
5601 HAN TAMPA, F		3			
FEI Number:	: 59-3405538	FEI Number Applied For ()	FEI Number Not Applicable (Certificate of Status Desired ()	
Name and	Address of C	Current Registered Agent:	Name and Addres	ss of New Registered Agent:	
GABBERT 5601 HAN TAMPA, F		6			
	named entity e of Florida.	submits this statement for the po	urpose of changing its regist	tered office or registered agent, or both,	
SIGNATU					
	Electror	nic Signature of Registered Age	nt	Date	
SEEIGED	C AND DIDEO	TORS:	ADDITIONS/CHA	NOTE TO OFFICERS AND DIRECTORS	
OFFICER:	S AND DIREC	IORS.	ADDITIONS/CHA	NGES TO OFFICERS AND DIRECTORS:	
Fitle: Name: Address: City-St-Zip:) Delete EST BLVD.	Title: Name: Address: City-St-Zip:	() Change () Addition	
Γitle: Name: Address:	P (LEMKE, MARK 5632 GLENCR TAMPA, FL 33) Delete EST BLVD. 625) Delete IICHAEL	Title: Name: Address:		
Fitle: Name: Address: City-St-Zip: Fitle: Name: Address:	P (LEMKE, MARK 5632 GLENCR TAMPA, FL 33 D (FAIRCLOTH, M 8903 W FLOR/ TAMPA, FL 33	Delete EST BLVD. 625 Delete IICHAEL A 615 Delete	Title: Name: Address: City-St-Zip: Title: Name: Address:	() Change () Addition	
Fitle: Name: Address: City-St-Zip: Fitle: Name: Address: City-St-Zip: Fitle: Name: Address: Name: Address:	P (LEMKE, MARK 5632 GLENCR TAMPA, FL 33) D (FAIRCLOTH, W 8903 W FLOR/ TAMPA, FL 33) D (MOST, CATHY 7103 HALIFAX TAMPA, FL 33)	Delete EST BLVD. 625 Delete IICHAEL A 615 Delete CT. 615 Delete Delete	Title: Name: Address: City-St-Zip: Title: Name: Address: City-St-Zip: Title: Name: Address:	() Change () Addition () Change () Addition	

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: FRED BENNETT D 03/02/2006