

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000003904

FILED  
Apr 22, 2009  
Secretary of State

Entity Name: CHRIST COMMUNITY LUTHERAN SCHOOL, INC.

**Current Principal Place of Business:**

14785 COLLIER BLVD..  
NAPLES, FL 34119

**New Principal Place of Business:**

14785 COLLIER BLVD..  
NAPLES, FL 34119

**New Mailing Address:**

FEI Number: 65-0806628      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

GROTH, ROBERT W  
1044 CASTELLO DR., SUITE 101  
NAPLES, FL 34103 US

**Name and Address of New Registered Agent:**

PILO, JAMES A  
1000 TAMiami TRAIL NORTH  
201  
NAPLES, FL 34102 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: JAMES A. PILON

04/22/2009

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: BP ( ) Delete  
Name: FESS, OWEN MR.  
Address: 4031 GULF SHORE BLVD N #101  
City-St-Zip: NAPLES, FL 34103 US

Title: D ( ) Delete  
Name: LIEBICH, LOIS MRS  
Address: 5010 KINGSTON WAY  
City-St-Zip: NAPLES, FL 34119

Title: D (X) Delete  
Name: JAMES, WILLIAM MR.  
Address: 1631 COLLINGSWOOD AVE.  
City-St-Zip: MARCO ISLAND, FL 34145

Title: D ( ) Delete  
Name: GRUNDEMAN, FRED MR  
Address: 2180 RUSTY FIG CT  
City-St-Zip: NAPLES, FL 34120

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: DP (X) Change ( ) Addition  
Name: FESS, OWEN MR.  
Address: 4031 GULF SHORE BLVD N #101  
City-St-Zip: NAPLES, FL 34103 US

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

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

Title: ( ) Change ( ) Addition  
Name:  
Address:  
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: JAMES A. PILON

RA

04/22/2009

Electronic Signature of Signing Officer or Director

Date