2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000007438

Apr 25, 2008 Secretary of State

Entity Name: JOYFUL SERVANTS LUTHERAN CHURCH, INC.

Current Principal Place of Business: New Principal Place of Business:

8158 BRINEGAR CIRCLE TAMPA, FL 33647

Current Mailing Address: New Mailing Address:

8158 BRINEGAR CIRCLE TAMPA, FL 33647

FEI Number: 59-3406897 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:

GARDNER TWEED, DAVID

8158 BRINEGAR CIRCLE

TAMPA, FL 33647 US

TWEED, DAVID G REV. DR

8158 BRINEGAR CIRCLE

TAMPA, FL 33647 US

TAMPA, FL 33647 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: DAVID GARDNER TWEED 04/25/2008

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

 Title:
 D
 () Delete
 Title:
 D
 (X) Change () Addition

 Name:
 GARDNER TWEED, DAVID
 Name:
 TWEED, DAVID G REV. DR

 Address:
 8158 BRINEGAR CIRCLE
 Address:
 8158 BRINEGAR CIRCLE

 City-St-Zip:
 TAMPA, FL 33647
 City-St-Zip:
 TAMPA, FL 33647

Title: PD () Delete Title: PRES (X) Change () Addition
Name: MILLER, THOMAS Name: MILLER, THOMAS
Address: 665 MEUSSA RD

Address: 665 MELISSA RD Address: 665 MELISSA RD
City-St-Zip: DUNEDIN, FL 34698 City-St-Zip: DUNEDIN, FL 34698

Title: TD () Delete Title: D (X) Change () Addition Name: KOZLOWSKI, DONNA Name: KOZLOWSKI, DONNA

Name:KOZLOWSKI, DONNAName:KOZLOWSKI, DONNAAddress:18941 DUQUESNE DRAddress:18941 DUQUESNE DRCity-St-Zip:TAMPA, FL 33647City-St-Zip:TAMPA, FL 33647

 $\label{eq:title:D} {\sf Title:} \qquad {\sf D} \qquad {\sf (A) Change (A) Addition}$

 Name:
 BUTLER, MAURINE
 Name:
 ALONSO, ALICIA

 Address:
 28732 TANNER DRIVE
 Address:
 9085 QUAIL CREEK DR.

 City-St-Zip:
 WESLEY CHAPEL, FL 33543
 City-St-Zip:
 TAMPA, FL 33647

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: DAVID GARDNER TWEED REV. 04/25/2008