

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
May 24, 2000 8:00 am
Secretary of State

05-24-2000 90066 033 ****61.25

DOCUMENT # P02201

1. Entity Name

EVANGELICAL LUTHERAN SYNOD, INC.

Principal Place of Business

Mailing Address

6 BROWNS COURT
 MANKOTO MN 56001-6121
 US

6 BROWNS COURT
 MANKOTO MN 56001-6121
 US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

23-7181739

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired

\$8.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

THOMPSON, BEN E., JR
1234 41ST AVENUE
VERO BEACH FL 32960

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW:
FEE IS \$61.25

9. Election Campaign Financing
 Trust Fund Contribution.

\$5.00 May Be
 Added to Fees

**Make Check Payable to
 Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE PD Delete
 NAME ORVICK, REV GEORGE
 STREET ADDRESS 6 BROWNS COURT
 CITY-ST-ZIP MANKATO MN 56001-6121

TITLE D Change Addition
 NAME Doepel, Rev Martin
 STREET ADDRESS 212 Volk St
 CITY-ST-ZIP Portage WI 53901

TITLE SD Delete
 NAME FERKENSTAD, REV. CRAIG A
 STREET ADDRESS RR 3 BOX 40
 CITY-ST-ZIP ST. PETER MN 56082-9515

TITLE D Change Addition
 NAME Borlaug, Allen
 STREET ADDRESS 1035 Windsor Ave
 CITY-ST-ZIP Waucoma IA 52171

TITLE TD Delete
 NAME MEYER, LEROY W.
 STREET ADDRESS 1038 SOUTH LEWIS AVENUE
 CITY-ST-ZIP LOMBARD IL 60148-4040

TITLE D Change Addition
 NAME Lieske, Wilbur
 STREET ADDRESS 9 Skyline Dr
 CITY-ST-ZIP Mankato MN 56001

TITLE D Delete
 NAME GRIFFIN, GREG
 STREET ADDRESS 1405 BURNING WOOD WAY
 CITY-ST-ZIP MADISON WI 53704-1009

TITLE D Change Addition
 NAME Brown, Robert
 STREET ADDRESS W305 N5660 Stevens Rd
 CITY-ST-ZIP Hartland WI 53029

TITLE DVP Delete
 NAME MOLDSTAD, JOHN JR
 STREET ADDRESS 114 ECHO ST.
 CITY-ST-ZIP MANKATO MN 56001-6128

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE D Delete
 NAME LEVORSON, ALBIN
 STREET ADDRESS 668 45TH ST.
 CITY-ST-ZIP NORTHWOOD IA 50459-8776

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Leroy W. Meyer*
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/30/00
 Date

670 971-0150
 Daytime Phone #

CR2E037 (9/99)