

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P31094

FILED
Feb 19, 2009
Secretary of State

Entity Name: MISSION INVESTMENT FUND OF THE EVANGELICAL LUTHERAN CHURCH IN AMERICA, INC.

Current Principal Place of Business:

8765 WEST HIGGINS RD.
CHICAGO, IL 60631

New Principal Place of Business:

Current Mailing Address:

8765 WEST HIGGINS RD.
CHICAGO, IL 60631

New Mailing Address:

FEI Number: 41-1586860

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 US

Name and Address of New Registered Agent:

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:

Title: P () Delete
Name: JACKSON-SKELTON, CHRISTINA
Address: 8765 WEST HIGGINS ROAD
City-St-Zip: CHICAGO, IL 60631

Title: VPT () Delete
Name: BENSON, ROBERT J
Address: 8765 WEST HIGGINS ROAD
City-St-Zip: CHICAGO, IL 60631

Title: VS () Delete
Name: TORRES, FRANK
Address: 8765 WEST HIGGINS ROAD
City-St-Zip: CHICAGO, IL 60631

Title: EVP () Delete
Name: ROBY, EVA
Address: 8765 WEST HIGGINS ROAD
City-St-Zip: CHICAGO, IL 60631

Title: D () Delete
Name: HANSON, DAVID W
Address: 26W417 PINEHURST DRIVE
City-St-Zip: WINFIELD, IL 60019

Title: D () Delete
Name: HUBER NEFF, JANET
Address: 29 MALSBY ROAD
City-St-Zip: ROYERSFORD, PA 19468

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

Title: () Change () Addition
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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: ROBERT J BENSON

VPT

02/19/2009

Electronic Signature of Signing Officer or Director

Date