

**2025 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 747004

**Entity Name:** LIVING FAITH, A CHURCH OF THE LUTHERAN BRETHREN  
INCORPORATED**Current Principal Place of Business:**939 SW 7TH CT  
CAPE CORAL, FL 33991-2422**Current Mailing Address:**939 SW 7TH CT  
CAPE CORAL, FL 33991-2422**FEI Number: 59-2406713****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**OSEN, MARY  
925 SW 6TH AVE  
CAPE CORAL, FL 33991 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: MARY OSEN****02/03/2025**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title	SECRETARY	Title	CHAIR OF ELDERS
Name	OSEN, MARY	Name	NARVESEN, PETE
Address	1227 SE 44TH ST	Address	4425 NORTHEAST 15TH AVENUE
City-State-Zip:	CAPE CORAL FL 33904	City-State-Zip:	CAPE CORAL FL 33909
Title	TREASURER	Title	COUNCIL CHAIR
Name	HALL, TERRIE	Name	LARSON, TIM FAITH
Address	11975 KING JAMES COURT	Address	2634 VAREO CT
City-State-Zip:	CAPE CORAL FL 33991	City-State-Zip:	CAPE CORAL FL 33991
Title	PASTOR	Title	ELDER
Name	NUGENT, ED A	Name	KOCH, CARL
Address	939 SW 7TH CT	Address	635 NORTHWEST 2ND LANE
City-State-Zip:	CAPE CORAL FL 33991	City-State-Zip:	CAPE CORAL FL 33993

*I hereby 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 all other like empowered.*

**SIGNATURE: OSEN, MARY****SECRETARY****02/03/2025**

Electronic Signature of Signing Officer/Director Detail

Date