

2014 FOREIGN NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F04000002957

Entity Name: THE LUTHERAN HOUR MINISTRIES FOUNDATION, INC.**Current Principal Place of Business:**660 MASON RIDGE CENTER DRIVE
ST. LOUIS, MO 63141-8557**Current Mailing Address:**660 MASON RIDGE CENTER DRIVE
ST. LOUIS, MO 63141-8557**FEI Number: 43-1927992****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**WRIGHT, EDWARD
2406 GALLAGHER AVE.
SPRING HILL, FL 34606 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:**

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title	C
Name	SWAN, MARVIN DR.
Address	BOX 863
City-State-Zip:	GRANT NE 69140-0863

Title	TR
Name	NEEMAN, CALVIN
Address	104 FAIRWAY DRIVE
City-State-Zip:	WATERLOO IL 62298

Title	TR
Name	SCHMIDT, ROY A
Address	5660 FIRETHORNE DRIVE
City-State-Zip:	BAY CITY MI 48706

Title	TRUSTEE
Name	DOLLAR, JARED
Address	1308 DRY CREEK RD
City-State-Zip:	JEFFERSON CITY MO 65109-6495

Title	TREA
Name	WITTBRAUCH, CURTISS A
Address	660 MASON RIDGE CENTER DRIVE
City-State-Zip:	ST. LOUIS MO 63141-8557

Title	PRES
Name	MELSER, HAROLD
Address	660 MASON RIDGE CENTER DRIVE
City-State-Zip:	ST. LOUIS MO 63141-8557

Title	TR
Name	KIDWELL, JOHN W
Address	3086 SHERWOOD LANE
City-State-Zip:	BAY CITY MI 48706

Title	TRUSTEE
Name	DUDA, BETTY
Address	185 SO ATLANTIC AVE
City-State-Zip:	COCOA BEACH FL 32931-2715

Continues on page 2

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: CURTISS A. WITTBRAUCH**TREASURER****03/31/2014**

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title TRUSTEE
Name GERBER, GLENN
Address 26314 ALPINE ROSE LANE
City-State-Zip: KATY TX 77494

Title VC
Name STONER, V. DALE
Address 904 ALOHA WAY
City-State-Zip: LADY LAKE FL 32159-2396

Title SECRETARY
Name PODOLL, LOREN
Address 3804 TAM O SHANTER DR.
City-State-Zip: RIVERTON WY 82501-5414

Title TRUSTEE
Name SCHWIEBERT, WELDON
Address 402 N. HANLON
City-State-Zip: WESTLAND MI 48185-3659

Title TRUSTEE
Name BUCHHOLZ, KURT
Address 660 MASON RIDGE CENTER DRIVE
City-State-Zip: ST. LOUIS MO 63141-8557

Title TRUSTEE
Name KRAUSS, PHILIP II
Address 32223 BERTRAM DR.
City-State-Zip: WESTLAND MI 48185-1518

Title TRUSTEE
Name MITCHELL, BRIAN
Address 306 SW WHITE RIDGE DR
City-State-Zip: LEE'S SUMMIT MO 64081

Title TRUSTEE
Name SCHMIDT, ROY A.
Address 5660 FIRETHORNE DR.
City-State-Zip: BAY CITY MI 48706

Title TRUSTEE
Name SOEKEN, KAREN
Address 4161 LOTUS CIR
City-State-Zip: ELLICOTT CITY MD 21043-4874