

2023 FOREIGN NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02201

Entity Name: EVANGELICAL LUTHERAN SYNOD, INC.

Current Principal Place of Business:

6 BROWNS COURT
MANKATO, MN 56001-6121

Current Mailing Address:

6 BROWNS COURT
MANKATO, MN 56001-6121 US

FEI Number: 23-7181739

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

LUTTMAN, MATTHEW
5140 WINDJAMMER LN
VERO BEACH, FL 32966 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: MATTHEW LUTTMAN

02/01/2023

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PRESIDENT, DIRECTOR
Name OBENBERGER, GLENN R
Address 6 BROWNS COURT
City-State-Zip: MANKATO MN 56001

Title SECRETARY, DIRECTOR
Name FERKENSTAD, REV. CRAIG A
Address 208 FOXFIRE DR
City-State-Zip: MANKATO MN 56001

Title TREASURER
Name WIEDERHOEFT, KEITH D
Address 209 CRYSTAL CIRCLE
City-State-Zip: MANKATO MN 56001

Title DIRECTOR
Name EWERT, DAVID
Address 213 AMBER COURT
City-State-Zip: MANKATO MN 56001

Title DIRECTOR
Name BEHR, DENNIS
Address 3025 WAUBESA AVE
City-State-Zip: MADISON WI 53711

Title VP
Name SMITH, REV MICHAEL
Address 3219 DIAMOND STREET
City-State-Zip: AMES IA 50010-8414

Title DIRECTOR
Name MADSON, REV. JONATHAN
Address N50 W35209 E WISCONSIN AVE
City-State-Zip: OCONOMOWOC WI 53066

Title DIRECTOR
Name MIELBRECHT, PAUL
Address 13119 231ST ST E
City-State-Zip: GRAHAM WA 98338

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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: MYRNA MEUNIER

**BUSINESS
ADMINISTRATOR**

02/01/2023

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name LEPAK, REV. PHILLIP
Address PO BOX 188
City-State-Zip: HARTLAND MN 56042-0188

Title DIRECTOR
Name VAN KAMPEN, REV PIET
Address 520 N FISK ST
City-State-Zip: GREEN BAY WI 54303

Title DIRECTOR
Name PEDERSEN, JT
Address 9390 FOXFORD RD
City-State-Zip: CHANHASSEN MN 55317

Title BUSINESS ADMINISTRATOR
Name MEUNIER, MYRNA
Address 6 BROWNS COURT
City-State-Zip: MANKATO MN 56001