above, or on an attachment with all other like empowered.		
SIGNATURE: SUSAN SCROGGINS	SR VP FOR FINANCE & TREASURER	01/15/2019

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

VALPARAISO, IN 46383

2019 FOREIGN NOT FOR PROFIT CORPORATION ANNUAL REPORT

Entity Name: THE LUTHERAN UNIVERSITY ASSOCIATION, INC.

## **Current Mailing Address:**

DOCUMENT# F0700000491

1700 CHAPEL DR KRETZMANN HALL

1700 CHAPEL DR KRETZMANN HALL VALPARAISO, IN 46383

**Current Principal Place of Business:** 

## FEI Number: 35-0868125

## Name and Address of Current Registered Agent:

NRAI SERVICES, INC 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 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

## Officer/Director Detail :

Title	C	Title	VC	
Name	KRAEGEL, FREDERICK G	Name	RAQUET, BONNIE E	
Address	1700 CHAPEL DR KRETZMANN HALL	Address	1700 CHAPEL DR KRETZMANN HALL	
City-State-Zip	VALPARAISO IN 46383	City-State-Zip:	VALPARAISO IN 46383	
Title	S	Title	PRESIDENT	
Tille	3	nue	TREGIDENT	
Name	FARHA, DARRON C	Name	HECKLER, MARK A	
Address	1700 CHAPEL DR KRETZMANN HALL	Address	1700 CHAPEL DR KRETZMANN HALL	
City-State-Zip	VALPARAISO IN 46383	City-State-Zip:	VALPARAISO IN 46383	
Title	SR VP & TREAS			
Name	SCROGGINS, SUSAN D			
Address	1700 CHAPEL DR KRETZMANN HALL			
City-State-Zip	VALPARAISO IN 46383			

Electronic Signature of Signing Officer/Director Detail

FILED Jan 15, 2019 Secretary of State 9943592789CC

Certificate of Status Desired: Yes

Date

Date