

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 703409

FILED
Mar 12, 2008
Secretary of State

Entity Name: GOOD SHEPHERD LUTHERAN CHURCH OF TAMPA, FLORIDA, INC.

Current Principal Place of Business:

501 S. DALE MABRY
TAMPA, FL 33609

New Principal Place of Business:

Current Mailing Address:

501 S. DALE MABRY
TAMPA, FL 33609

New Mailing Address:

FEI Number: 59-0910351

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

OXLEY, DEBORAH P
371 CHANNELSIDE WALK WAY, UNIT 301
TAMPA, FL 33602 US

Name and Address of New Registered Agent:

HEISER, STEVEN
2902 N. SHOREVIEW PLACE
TAMPA, FL 33602 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: STEVEN HEISER

03/12/2008

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: T () Delete
Name: OXLEY, DEBORAH
Address: 371 CHANNELSIDE WALK WAY # 301
City-St-Zip: TAMPA, FL 33602

Title: V () Delete
Name: MEININGER, STEPHEN
Address: 1033 NORMANDY TRACE RD
City-St-Zip: TAMPA, FL 33602

Title: S () Delete
Name: ROBINSON, CHRIS
Address: 2805 W. HAWTHORNE RD
City-St-Zip: TAMPA, FL 33611

Title: P () Delete
Name: HEISER, STEVEN
Address: 2902 N. SHOREVIEW PL.
City-St-Zip: TAMPA, FL 33602

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
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: STEVEN HEISER

MR.

03/12/2008

Electronic Signature of Signing Officer or Director

Date