

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N94000006159

FILED
Mar 07, 2007
Secretary of State

Entity Name: GOOD SHEPHERD SCHOOL FOUNDATION, INC.

Current Principal Place of Business:

5902 E. OLEANDER STREET
ORLANDO, FL 32807

New Principal Place of Business:

Current Mailing Address:

5902 E. OLEANDER STREET
ORLANDO, FL 32807

New Mailing Address:

FEI Number: 59-3305012 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MCNAMEE, PATRICIA
5902 E OLEANDER ST
ORLANDO, FL 32807 US

Name and Address of New Registered Agent:

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

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: DONOVAN, DANIEL
Address: C/O 5902 E OLEANDER ST
City-St-Zip: ORLANDO, FL 32807

Title: VD () Delete
Name: KINIRY, DAVID
Address: C/O 5902 E OLEANDER ST
City-St-Zip: ORLANDO, FL 32807

Title: VD () Delete
Name: FRITZ, REBA
Address: C/O 5902 E OLEANDER ST
City-St-Zip: ORLANDO, FL 32807

Title: SD () Delete
Name: KELLY, BEATRICE
Address: % 5902 OLEANDER DRIVE
City-St-Zip: ORLANDO, FL 32807

Title: TD () Delete
Name: JANOWIAK, MICHAEL
Address: % 5902 OLEANDER DRIVE
City-St-Zip: ORLANDO, FL 32807

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: RIDDLE, JOHN
Address: C/O 5902 E OLEANDER ST
City-St-Zip: ORLANDO, FL 32807

Title: VD (X) Change () Addition
Name: HANVEY, KATHY
Address: C/O 5902 E OLEANDER ST
City-St-Zip: ORLANDO, FL 32807

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 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: REBA FRITZ

VD

03/07/2007

Electronic Signature of Signing Officer or Director

_____ Date