## 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT# 739554** 

FILED May 04, 2008 Secretary of State

Entity Name: THE CHURCH OF THE LIVING GOD, "THE GOOD SHEPPARD", INC. **Current Principal Place of Business: New Principal Place of Business:** 105 DIXIANA DRIVE BOWLING GREEN, FL 33834 **Current Mailing Address: New Mailing Address:** P. O. BOX 622 BOWLING GREEN, FL 33834 FEI Number: 65-0983060 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Name and Address of Current Registered Agent: Name and Address of New Registered Agent: MARTINEZ, JOSE A 242 GLADES ST BOWLING GREEN, FL 33834 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 **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: (X) Change ( ) Addition () Delete CORTES, RAMIRO BACA MARTINEZ, JOSE A Name: Name: 715 DOCCOIL RD Address: 242 GLADES ST Address: City-St-Zip: BOWLING GREEN, FL 33834 City-St-Zip: BOWLING GREEN, FL 33834 Title: TD () Delete Title: () Change () Addition MARTINEZ, AGUSTIN Name: Name: Address: 253 GLADES RD Address: City-St-Zip: BOWLING GREEN, FL 33834 City-St-Zip: Title: () Delete Title: SD (X) Change ( ) Addition MARTINEZ, JOHNNY RODRIGUEZ, GLORIA Name: Name: 253 GLADES RD Address: 4716 CHURCH AVE Address: City-St-Zip: BOWLING GREEN, FL 33834 City-St-Zip: BOWLING GREEN, FL 33834 Title: ( ) Delete Title: D (X) Change ( ) Addition MARTINEZ, JOSE A Name: Name: CRUZ, IRVIN D Address: 242 GLADES ST Address: 812 3RD ST E City-St-Zip: BOWLING GREEN, FL 33834 City-St-Zip: ZOLFO SPRINGS, FL 33890 Title: () Delete Title: ( ) Change (X) Addition CONTRERAS, JAIME G Name: Name: 715 DOC COIL RD Address: Address: BOWLING GREEN, FL 33834 City-St-Zip: 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: JOSE A MARTINEZ PD 05/04/2008