

**2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N08000008650

**Entity Name:** GOOD SHEPHERD COMMUNITY CHURCH, INC.

**Current Principal Place of Business:**

12600 NW 4TH AVENUE  
N MIAMI, FL 33168

**FILED**  
**Jun 10, 2014**  
**Secretary of State**  
**CC5710991292**

**Current Mailing Address:**

1164 NE 131 ST  
N MIAMI, FL 33161 US

**FEI Number: 26-3471514**

**Certificate of Status Desired: No**

**Name and Address of Current Registered Agent:**

BARBER, KEVIN  
1164 NE 131ST ST  
N MIAMI, FL 33161 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

**Officer/Director Detail :**

Title P  
Name BARBER, ROBERT E REV  
Address 8785 ERIE LANE  
City-State-Zip: PARRISH FL 34219

Title TS  
Name BARBER, KEVIN  
Address 1164 NE 131ST ST  
City-State-Zip: N MIAMI FL 33161

Title P  
Name FAISON, DAVID  
Address 16400 NW 37TH AVE  
City-State-Zip: OPA LOCKA FL 33054

Title O  
Name MALONE, RON  
Address 11040 SW 138TH ST  
City-State-Zip: MIAMI FL 33176

Title VP  
Name ALEXIS, GARY  
Address 1220 NW 129 ST  
City-State-Zip: NORTH MIAMI FL 33168

*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: KEVIN BARBER**

**TREASURER**

**06/10/2014**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date