

**2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N94000006159

**FILED**  
**Feb 05, 2019**  
**Secretary of State**  
**5756937664CC**

**Entity Name:** GOOD SHEPHERD SCHOOL FOUNDATION, INC.

**Current Principal Place of Business:**

5902 E. OLEANDER STREET  
ORLANDO, FL 32807

**Current Mailing Address:**

5902 E. OLEANDER STREET  
ORLANDO, FL 32807

**FEI Number: 59-3305012**

**Certificate of Status Desired: No**

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

MCNAMEE, PATRICIA  
5902 E OLEANDER ST  
ORLANDO, FL 32807 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 PD  
Name MCNAMEE, PATRICIA  
Address C/O 5902 E OLEANDER ST  
City-State-Zip: ORLANDO FL 32807

Title VD  
Name SUERO, CARLA M  
Address C/O 5902 E OLEANDER ST  
City-State-Zip: ORLANDO FL 32807

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

Title SD  
Name FINKE, HOLLY  
Address % 5902 OLEANDER DRIVE  
City-State-Zip: ORLANDO FL 32807

Title TD  
Name JANOWIAK, MICHAEL  
Address % 5902 OLEANDER DRIVE  
City-State-Zip: ORLANDO FL 32807

*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: REBA FRITZ**

**VICE-DIRECTOR**

**02/05/2019**

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

\_\_\_\_\_  
Date