

2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000001448

Entity Name: MINISTRY OF THE GOOD SHEPHERD, INC.**Current Principal Place of Business:**224 NE 3RD ST.
BOCA RATON, FL 33432**Current Mailing Address:**P.O. BOX 837
BOCA RATON, FL 33429**FEI Number:** 65-0877749**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**O'SULLIVAN, MARJORIE MRS.
224 NE 3RD ST.
BOCA RATON, FL 33432 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	PRES	Title	VP
Name	FICKEL, JERRY BMR.	Name	MANCERI, ISABEL CMRS.
Address	11530 SW 83RD TERR.	Address	2355 NW 43 STREET
City-State-Zip:	MIAMI FL 33173	City-State-Zip:	BOCA RATON FL 33431
Title	SECR	Title	TREA
Name	O'SULLIVAN, MARJORIE MRS.	Name	MURADAZ, ANTONIO
Address	224 NE 3RD ST.	Address	2641 CITRUS KEY LIME CT.
City-State-Zip:	BOCA RATON FL 33432	City-State-Zip:	NAPLES FL 33173
Title	DIR	Title	DIR
Name	MARJORIE, O'SULLIVAN MRS.	Name	WILLIAM, COMISKEY MR.
Address	224 NE 3RD ST.	Address	495 HOLLEY AVE.
City-State-Zip:	BOCA RATON FL 33432	City-State-Zip:	LABELLE FL 33935

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: JERRY B. FICKEL**PRESIDENT****02/18/2014**

Electronic Signature of Signing Officer/Director Detail

Date