2002 UNIFORM BUSINESS REPORT (UBR)

1/

FILED
Mar 12, 2002 8:00 am
Secretary of State
01-28-2002 90037 004 ****61.25

DOCUMENT # 701211 N/C 1/17/02 TM

1. Entity Name

~~THE EVANGELICAL FREE CHURCH OF ENGLEWOOD FLORIDA INCORPORATED,~~ The Good Shepherd Church of Englewood,

Principal Place of Business	Mailing Address
2550 ENGLEWOOD ROAD ENGLEWOOD FL 34223	2550 ENGLEWOOD ROAD ENGLEWOOD FL 34223

810297

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

4. FEI Number 65-0034619 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
HEDGEPETH, ROBERT E 35 CLINTWOOD AVE ENGLEWOOD FL 34223	Name DENNIS BABCOCK Street Address (P.O. Box Number Is Not Acceptable) 1960 MISSISSIPPI AVE City GROVE CITY FL Zip Code 34224

8. 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: Dennis G. Babcock DENNIS BABCOCK 2/26/02
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW: FEE IS $61.25

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

Make Check Payable to Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S WING, BETTY 874 SECOND ST ENGLEWOOD FL 34223	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D BOWERS, THURMAN 526 AMBERJACK DR NORTH PORT FL 34287	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D AXBERG, JOHN 1690 ELINOR PLACE ENGLEWOOD FL 34223	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T PUTMAN, RICHARD 591 COBALT RD ENGLEWOOD FL 34223	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D PUTMAN, RICHARD 665 FOXWOOD BLVD. ENGLEWOOD, FL 34223 ☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DC DOODY, FRANK 580 ORIENTAL POPPY DRIVE VENICE FL 34293	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T & DC DOODY, FRANK 580 ORIENTAL POPPY DRIVE VENICE, FL 34293 ☒ Change ☐ Addition
TITLE CH / NAME Chair / STREET ADDRESS / CITY-ST-ZIP	ROBERT HEDGEPETH 35 CLINTWOOD AVE ENGLEWOOD, FL 34223	☒ Delete	TITLE CHAIRMAN / NAME / STREET ADDRESS / CITY-ST-ZIP	CHURCH CHAIRMAN DENNIS BABCOCK 1960 MISSISSIPPI AVE. GROVE CITY, FL 34224 ☒ Change ☐ Addition

CR2E037 (9/01)

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: X Dennis G. Babcock SIGNATURE REQUIRED Jan 10, 2002 941 474-1905
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #