

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 701211

FILED
Apr 28, 2009
Secretary of State

Entity Name: GOOD SHEPHERD CHURCH OF ENGLEWOOD, INC.

Current Principal Place of Business:

2550 ENGLEWOOD ROAD
ENGLEWOOD, FL 34223

New Principal Place of Business:

Current Mailing Address:

2550 ENGLEWOOD ROAD
ENGLEWOOD, FL 34223

New Mailing Address:

FEI Number: 65-0034619

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BABCOCK, DENNIS
1960 MISSISSIPPI AVENUE
GROVE CITY, FL 34224 US

Name and Address of New Registered Agent:

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:

Title: C () Delete
Name: MELVIN, BILLY A
Address: 7 OLD TRAIL ROAD
City-St-Zip: ENGLEWOOD, FL 34223

Title: D (X) Delete
Name: ASHLEY, LEWIS
Address: 500 IDEAL PLACE HARBOR COVE
City-St-Zip: NORTH PORT, FL 34287

Title: S () Delete
Name: BABCOCK, DENNIS
Address: 1960 MISSISSIPPI AVENUE
City-St-Zip: GROVE CITY, FL 34224

Title: D (X) Delete
Name: WING, WILFRED
Address: 874 SECOND STREET
City-St-Zip: ENGLEWOOD, FL 34223

Title: D () Delete
Name: SHARP, JAMES M
Address: 440 EDWARDS STREET
City-St-Zip: ENGLEWOOD, FL 34223

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
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: BILLY A. MELVIN

C

04/28/2009

Electronic Signature of Signing Officer or Director

Date