


FILE NOW: FILING FEE IS \$61.25

FILED  
May 07 1997 8:00am  
Secretary of State

<b>NONPROFIT CORPORATION ANNUAL REPORT 1997</b>		<b>FLORIDA DEPARTMENT OF STATE</b> <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS
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**DOCUMENT # 710399 (7)**  
 1. Corporation Name  
**GOOD SHEPHERD UNITED METHODIST CHURCH, INC.**



<b>Principal Place of Business</b> 2341 SOUTH MILITARY TRAIL WEST PALM BEACH FL 33415	<b>Mailing Address</b> 2341 SOUTH MILITARY TRAIL WEST PALM BEACH FL 33415-7543
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<b>3. Date Incorporated or Qualified</b> 02/21/1966	<b>3a. Date of Last Report</b> 04/29/1996
<b>4. FEI Number</b> 59-6193781	Applied For <input type="checkbox"/> Not Applicable
<b>5. Certificate of Status Desired</b> <input checked="" type="checkbox"/>	<b>\$8.75 Additional Fee Required</b>
<b>6. Election Campaign Financing Trust Fund Contribution</b> <input type="checkbox"/>	<b>\$5.00 May Be Added to Fees</b>
<b>8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes</b> <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

<b>2. Principal Place of Business</b> 21 Suite, Apt. #, etc. 22 City & State 23 Zip 24 Country	<b>2a. Mailing Address</b> 26 Suite, Apt. #, etc. 27 City & State 28 Zip 29 Country
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<b>9. Name and Address of Current Registered Agent</b> GANN, JAMES M ATTY. 257 SOUTHEAST AVE. E BELLE GLADE FL 33430
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<b>10. Name and Address of New Registered Agent</b> 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City FL 85 Zip Code
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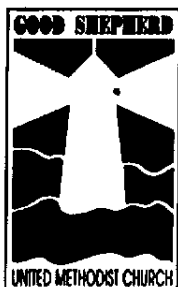
11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
<b>TITLE</b> <b>D</b> <input checked="" type="checkbox"/> DELETE	<b>NAME</b> STOPKE, MARY ELLEN <b>STREET ADDRESS</b> 1531 DREXEL RD. N. #379 <b>CITY-ST-ZIP</b> WEST PALM BEACH FL 33417	<b>1.1 TITLE</b> <b>P</b> <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	<b>NAME</b> Thomas W. Elliott, III <b>STREET ADDRESS</b> 2341 S. Military Trail <b>CITY-ST-ZIP</b> West Palm Beach, FL 33415-7599
<b>TITLE</b> <b>D</b> <input type="checkbox"/> DELETE	<b>NAME</b> RAYSIDE, LARRY <b>STREET ADDRESS</b> 2341 S. MILITARY TRAIL <b>CITY-ST-ZIP</b> WEST PALM BEACH FL 33415	<b>2.1 TITLE</b> <b>S</b> <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	<b>NAME</b> Launa K. Rau <b>STREET ADDRESS</b> 2341 S. Military Trail <b>CITY-ST-ZIP</b> West Palm Beach, FL 33415-7599
<b>TITLE</b> <b>D</b> <input checked="" type="checkbox"/> DELETE	<b>NAME</b> MADDOX, FRED <b>STREET ADDRESS</b> 2341 S. MILITARY TRAIL <b>CITY-ST-ZIP</b> WEST PALM BEACH FL 33415	<b>3.1 TITLE</b> <b>D</b> <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	<b>NAME</b> Kenneth R. Whitaker <b>STREET ADDRESS</b> 2341 S. Military Trail <b>CITY-ST-ZIP</b> West Palm Beach, FL 33415-7599
<b>TITLE</b> <b>D</b> <input checked="" type="checkbox"/> DELETE	<b>NAME</b> COOK, MARK <b>STREET ADDRESS</b> 15100 FOREST LANE <b>CITY-ST-ZIP</b> LOXAHATCHEE FL	<b>4.1 TITLE</b> <b>V</b> <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	<b>NAME</b> Hires, Robert E.
<b>TITLE</b> <b>D</b> <input type="checkbox"/> DELETE	<b>NAME</b> SMITH, CARLENE <b>STREET ADDRESS</b> 2341 S. MILITARY TRAIL <b>CITY-ST-ZIP</b> WEST PALM BEACH FL 33415		
<b>TITLE</b> <b>D</b> <input type="checkbox"/> DELETE	<b>NAME</b> HIERS, ROBERT <b>STREET ADDRESS</b> 2341 S. MILITARY TRAIL <b>CITY-ST-ZIP</b> WEST PALM BEACH FL 33415		

14. I do 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

CR2E037 (9/96)



## ***GOOD SHEPHERD UNITED METHODIST CHURCH***

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2341 South Military Trail - West Palm Beach, FL 33415-7599 - (561) 965-4311

FAX - (561) 965-4775

### ***GOOD SHEPHERD UNITED METHODIST CHURCH ADDITIONAL DIRECTORS, BOARD OF TRUSTEES***

***D***

***Edington, Brian J.  
2341 S. Military Trail  
West Palm Beach, FL 33415-7599***

***D***

***Camilleri, Ann Marie  
2341 S. Military Trail  
West Palm Beach, FL 33415-7599***

***D***

***Kuzmirek, Cas L.  
2341 S. Military Trail  
West Palm Beach, FL 33415-7599***

***D***

***VanderWoude, Jim  
2341 S. Military Trail  
West Palm Beach, FL 33415-7599***