


2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 31, 2006 08:00 AM
Secretary of State

DOCUMENT # 743144	
1. Entity Name CHURCH OF THE GOOD SHEPHERD, CHURCH OF THE BRETHREN, INC.	

Principal Place of Business 6323 13TH ST. CT. E. BRADENTON, FL 34203	Mailing Address 6323 13TH ST. CT. E. BRADENTON, FL 34203
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01102006 No Chg-NP CR2E037 (11/05)

4. FCI Number 59-1790794	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent WHITE, DON E. 6017 FERDELL ST BRADENTON, FL 34203-2325

**DO NOT WRITE
IN THIS SPACE**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____
Signature typed or printed name of registered agent and title if applicable. (NO FL Registered Agent signature required when renewing) DATE _____

**Filing Fee is \$61.25
Due by May 1, 2006**

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

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	V CHILDES, VIRTUE 6506 MAUI BRADENTON, FL 34207
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D THOMPSON, LOUISE 102-47TH AVE DR W #342 BRADENTON, FL 34207
TITLE NAME STREET ADDRESS CITY - ST - ZIP	S MILLER, VIRGIL 1005 48TH AVE DR E #83 BRADENTON, FL 34203
TITLE NAME STREET ADDRESS CITY - ST - ZIP	TD BABCOCK, JEANNETTE 10 RIVERVIEW LANE BRADENTON, FL
TITLE NAME STREET ADDRESS CITY - ST - ZIP	P HENRY, JOSEPH 6611-1ST STREET WEST BRADENTON, FL 34207
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D TINDER, JEANNE 2009 DUDLEY ST SARASOTA, FL 34234

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02/09/06-80026-016 61.25

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: *Louise Thompson* Louise Thompson 1/26/06 941/756-6616
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone