## 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT#760742** 

FILED Feb 16, 2005 Secretary of State

Entity Name: EPISCOPAL CHURCH OF THE GOOD SHEPHERD, INC.

Current Principal Place of Business: New Principal Place of Business:

331 LAKE AVE.

MAITLAND, FL 32751

Current Mailing Address: New Mailing Address:

331 LAKE AVE. MAITLAND, FL 32751

FEI Number: 59-1023430 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

STEVENSON, EDWARD M 331 LAKE AVENUE MAITLAND, FL 32751 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:

Floatrania Signatura of Degistered Agent

Electronic Signature of Registered Agent

Date

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

## **OFFICERS AND DIRECTORS:**

Title: TR (X) Change ( ) Addition

 Title:
 D
 ( ) Delete
 Title:
 TR
 (X) Change ( )

 Name:
 FENDLEY, PAMELA
 Name:
 FENDLEY, PAMELA

 Address:
 218 HOUND RUN PL.
 Address:
 218 HOUND RUN PL.

 City-St-Zip:
 CASSELBERRY, FL 32707
 City-St-Zip:
 CASSELBERRY, FL 32707

Title:JRW() DeleteTitle:JRW(X) Change () AdditionName:PONDER, STEWARTName:EDMUNDSON, SHIRLEYAddress:1371 LYNDALE BLVD.Address:2191 WEKIVA VILLAGE LANE

City-St-Zip: WINTER PARK, FL 327892320 City-St-Zip: APOPKA, FL 32703

Title: S ( ) Delete Title: S (X) Change ( ) Addition Name: FOLSOM, KEITH S Name: FOLSOM, MEG

 Address:
 2539 DAKOTA TR.
 Address:
 2539 DAKOTA TR.

 City-St-Zip:
 CASSELBERRY, FL 32730
 City-St-Zip:
 CASSELBERRY, FL 32730

Title: SW ( ) Delete Title: SW (X) Change ( ) Addition Name: GRANT, GLORIA W Name: MADILL, GEORGE

Address: 706 CRANES CIR. W. Address: 3102 BAY LAKE ROAD City-St-Zip: ALTAMONTE SPRINGS, FL 327017654 City-St-Zip: ORLANDO, FL 32808

I hereby certify that the information supplied with this filing does not qualify for the 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 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: GEORGE MADILL SW 02/16/2005