

F05000005815

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

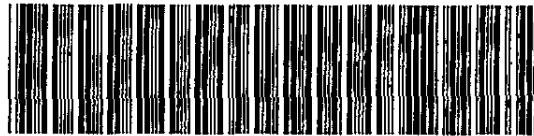
(Document Number)

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2005 OCT -6 PM 4:37  
TALLAHASSEE, FLORIDA

AUTHORIZATION BY PHONE TO

CORRECT #8 to be affordable housing development in

DATE 10/07/05 @ 3:06 pm ministry

DOC EX-11

J. BRYAN OCT 10 2005

## TRANSMITTAL LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Shepherd Hand Community Development & Enrichment, Inc.  
(Name of Corporation – must include suffix)

Dear Sir or Madam:

The enclosed "Application by Foreign Not for Profit Corporation for Authorization to Conduct its Affairs in Florida", "Certificate of Existence", and check are submitted to register the above referenced not for profit corporation to conduct its affairs in Florida.

Please return all correspondence concerning this matter to the following:

James A. Rich

(Name of Person)

Shepherd Hand Community Development & Enrichment, Inc.

(Firm/Company)

PO Box 4553

(Address)

Milton, FL 32572

(City/State and Zip Code)

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DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

For further information concerning this matter, please call:

James A. Rich

(Name of Person)

at ( 850 ) 777-1860

(Area Code & Daytime Telephone Number)

**STREET ADDRESS:**

Registration Section  
Division of Corporations  
409 E. Gaines St.  
Tallahassee, FL 32399

**MAILING ADDRESS:**

Registration Section  
Division of Corporations  
P. O. Box 6327  
Tallahassee, FL 32314

Enclosed is a check for the following amount:

- ☐ \$70.00 Filing Fee    ☒ \$78.75 Filing Fee & Certificate of Status    ☐ \$78.75 Filing Fee & Certified Copy    ☐ \$87.50 Filing Fee, Certificate of Status & Certified Copy

**APPLICATION BY FOREIGN NOT FOR PROFIT CORPORATION FOR AUTHORIZATION TO  
CONDUCT ITS AFFAIRS IN FLORIDA**

*IN COMPLIANCE WITH SECTION 617.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO  
REGISTER A FOREIGN NOT FOR PROFIT CORPORATION FOR AUTHORIZATION TO CONDUCT ITS AFFAIRS IN  
THE STATE OF FLORIDA:*

1. Shepherd Hand Community Development & Enrichment, Inc.  
(Name of corporation: must include the word "INCORPORATED" or "CORPORATION" or words or abbreviations of like import in language as will clearly indicate that it is a corporation instead of a natural person or partnership if not so contained in the name at present. "Company" or "Co." may not be used as a corporate suffix by a nonprofit corporation.)
2. Georgia 3. 37-1488389  
(State or country under the law of which it is incorporated) (FEI number, if applicable)
4. April 29, 2004 5. December 31, 2008  
(Date of Incorporation) (Duration: Year corp. will cease to exist or "perpetual")
6. \_\_\_\_\_  
(Date first conducted affairs in Florida if prior to registration. See sections 617.1501 & 617.1502, F.S. to determine penalty liability.)
7. 4857 Jaimee Leigh Drive, Milton, FL 32572  
(Principal office address)

Post Office Box 4553, Milton, FL 32572  
(Current mailing address)

8. Affordable Housing Development & Ministry  
(Purpose(s) of corporation authorized in home state or country to be carried out in the state of Florida)

9. Name and street address of Florida registered agent: (P.O. Box **NOT** acceptable)

Name: James A. Rich

Office Address: 4857 Jaimee Leigh Drive

Milton, Florida 32570  
(City) (Zip Code)

10. **Registered Agent's acceptance:**  
*Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.*

James A. Rich  
(Registered Agent's signature)

11. Attached is a Certificate of Existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

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TALLAHASSEE, FLORIDA

12. Names and addresses of officers and/or directors:

**A. DIRECTORS**

Chairman: \_\_\_\_\_

Address: \_\_\_\_\_

Vice Chairman: \_\_\_\_\_

Address: \_\_\_\_\_

Director: \_\_\_\_\_

Address: \_\_\_\_\_

Director: \_\_\_\_\_

Address: \_\_\_\_\_

**B. OFFICERS**

President: James A. Rich

Address: PO Box 4553, Milton, FL 32572

Vice President: Mamie L. Rich

Address: PO Box 4553, Milton, FL 32572

Secretary: Mamie L. Rich

Address: PO Box 4553, Milton, FL 32572

Treasurer: Michael A. White

Address: 1412 Lily Pond Road, Albany, GA 31707

**NOTE:** If necessary, you may attach an addendum to the application listing additional officers and/or directors.

13. James A. Rich  
(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)

14. James A. Rich  
(Typed or printed name and capacity of person signing application)

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JAMES A. RICH  
TALLAHASSEE, FLORIDA

**Secretary of State**  
**Corporations Division**  
**315 West Tower**  
**#2 Martin Luther King, Jr. Dr.**  
**Atlanta, Georgia 30334-1530**

CONTROL NUMBER : 0431405  
DATE INC/AUTH/FILED: 04/29/2004  
JURISDICTION : GEORGIA  
PRINT DATE : 09/01/2005  
FORM NUMBER : 211

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TALLAHASSEE, FLORIDA

SHEPHERD HAD COMMUNITY DEVELOPMENT & ENRICHMENT, I  
JAMES A RICH  
PO BOX 4553  
MILTON, FL 32572

**CERTIFICATE OF EXISTENCE**

I, Cathy Cox, the Secretary of State of the State of Georgia, do hereby certify under the seal of my office that as of the above print date

**SHEPHERD HAD COMMUNITY DEVELOPMENT & ENRICHMENT, INC.**  
**A GEORGIA NON-PROFIT CORPORATION**

is in compliance with the applicable filing and annual registration provisions of Title 14 of the Official Code of Georgia Annotated.

Said entity was formed in the jurisdiction stated above or was authorized to transact business in Georgia on the above date and has not filed articles of dissolution, certificate of cancellation or any other similar document with the Office of the Secretary of State.

This certificate relates only to the legal existence of the above-named entity as of the print date above. It does not certify whether or not a notice of intent to dissolve, an application for withdrawal, a statement of commencement of winding up or any other similar document has been filed or is pending with the Secretary of State.

This information is electronically transmitted, issued and certified in accordance with the Georgia Electronic Records and Signatures Act and Title 14 of the Official Code of Georgia Annotated and is prima-facie evidence that said entity is in existence or is authorized to transact business in this state.

20050901194920875



*Cathy Cox*

Cathy Cox  
Secretary of State