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Mar 02, 1999 8:00 am
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03-02-1999 90069 002 ****61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # F93000003420

1. Corporation Name

GOOD SHEPHERD WORLD OUTREACH, INC.

Principal Place of Business

5019 ROLLING MEADOW DR
LAKELAND FL ~~33809~~
33810

Mailing Address

5019 ROLLING MEADOW DR
LAKELAND FL ~~33809~~
33810



2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip Country
24 25

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip Country
29 30

3. Date Incorporated or Qualified

07/27/1993

4. FEI Number
39-1630168

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

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

9. Name and Address of Current Registered Agent

TAYLOR, PAUL
5019 ROLLING MEADOW DR
LAKELAND FL 33809

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE PD
NAME TAYLOR, PAUL
STREET ADDRESS 5019 ROLLING MEADOW DR
CITY-ST-ZIP LAKELAND FL ☐ DELETE

TITLE VD
NAME TAYLOR, NORITA
STREET ADDRESS 5019 ROLLING MEADOW DR
CITY-ST-ZIP LAKELAND FL ☐ DELETE

TITLE D
NAME CUMMINGS, RHONDA
STREET ADDRESS 5606 E 71ST PL 912
CITY-ST-ZIP TULSA OK 74136 ☒ DELETE

TITLE D
NAME David Lundblad
STREET ADDRESS 4931 1st St. NW
CITY-ST-ZIP Lakeland, FL 33810 ☐ DELETE

TITLE D
NAME Marie Lundblad
STREET ADDRESS 4931 1st ST NW
CITY-ST-ZIP Lakeland, FL 33810 ☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I 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, with all other like empowered.

SIGNATURE:

Paul Taylor
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/20/99

Date

(941) 853-9280

Daytime Phone #

CR2E037 (11/98)