

**2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED  
Jan 08, 2004  
Secretary of State**

DOCUMENT# F93000003420

Entity Name: GOOD SHEPHERD WORLD OUTREACH, INC.

**Current Principal Place of Business:**

8330 N. SOCRUM LOOP RD  
LAKELAND, FL 33809

**New Principal Place of Business:**

**Current Mailing Address:**

8330 N. SOCRUM LOOP RD  
LAKELAND, FL 33809

**New Mailing Address:**

FEI Number: 39-1630168      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

TAYLOR, PAUL  
2727 JENNIFER DRIVE  
LAKELAND, FL 33810      US

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

TAYLOR, PAUL REV.  
2727 JENNIFER DRIVE  
LAKELAND, FL 33810      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: REV. PAUL E. TAYLOR      01/08/2004  
Electronic Signature of Registered Agent      Date

**OFFICERS AND DIRECTORS:**

Title: PD      ( ) Delete  
Name: TAYLOR, PAUL  
Address: 2727 JENNIFER DR  
City-St-Zip: LAKELAND, FL 33810

Title: VD      ( ) Delete  
Name: TAYLOR, NORITA  
Address: 2727 JENNIFER DR  
City-St-Zip: LAKELAND, FL 33810

Title: D      ( ) Delete  
Name: LOGAN, JAYNE  
Address: 1022 LAMP POST LANE  
City-St-Zip: LAKELAND, FL 33809

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: PAUL E. TAYLOR      PD      01/08/2004  
Electronic Signature of Signing Officer or Director      Date