FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION **ANNUAL REPORT**

1998



Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

(6)

SHEPHERD ACADEMY, INC.

FILED Jun 04 1998 8:00am Secretary of State



Principal Plac	e of Business	Mailing Address					
	rlane road Ee Fl 32312		1246 TIMBERLANE ROAD				
(MCDANA99	EE FL 32312	TALLAHASSEE FL	32312		DO NOT WRITE IN T	HIS SPACE	
					3. Date Incorporated or Qualified		
					03/17/1989		
2. Principal F	Place of Business	2s. Mailing Address			4. FEI Number	- I Ar	oplied For
21		26			59-2942370		ot Applicable
Suite, Apt. #, etc		Suite, Apt. #, etc	Suite, Apt. #, etc.		5. Certificate of Status Desired S8.75 Additio		Additional
22		27			5. Certificate of Status Desired	Fee R	equired
City & Stat	te	City & State			6. Election Campaign Financing	\$5.00	May Be
23		28			Trust Fund Contribution	Added	to Fees
Zip	Country	Zip	Coun	ntry	8. This corporation owes or has paid the		_ ~
24	25	29	30		Personal Property Tax due June 30.		No
	9. Name and Address of Curr	ent Registered Agent			10. Name and Address of New Registe	red Agent	
	IXON, JAMES		1	81 Name			
902 NORTH GADSDEN ST.				82 Street Address (P.O. Box Number is Not Acceptable)			
T/	NLLAHASSEE FL 32303		-				
]*	83			
			l ₇	84 City	· · · · · · · · · · · · · · · · · · ·	85 Zip	Code
<u> </u>				'		PLII	
SIGNATURE	Signature, typed or printed name of registered a	gent and little if applicable				ME	
12.		ND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS		
TITLE	PO	DELET	É 1.1 TiTL	-E		Change	Addition
NAME	SHEPHERD, DELORES A.		1.2 NAM	ME }			
STREET ADDRESS	1246 TIMBERLANE RD.		1.3 STR	REET ADDRESS			
CITY-ST-ZIP	TALLAHASSEE FL			Y-ST-ZIP			
TITLE	ł	☐ DELETI				☐ Change	Addition
NAME			22 NAM	ME			
STREET ADDRESS			2.3 STR	REET ADORESS			
CITY-ST-ZIP				Y - ST - ZIP			TT 7
TITLE		☐ D€LETI				Change	Addition
NAME	1		3.2 NAN				
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CITY-ST-ZIP		T pricte		Y-ST-ZIP		T Observe	T A delation
TITLE	}	☐ DELET				☐ Change	Addition
NAME			4, 2 NA	···			
STREET ADDRESS	Į.			REET ADDRESS			
CITY-ST-ZIP		DELET		Y-ST-ZIP		Change	Addition
TITLE	1	CT OFFEI	1	[□1 cuands	L.J Addition
NAME OTREET ADDRESS	J		5.2 NAA				
STREET ADDRESS				EET ADDRESS			
CITY-ST-ZIP	 	□ DELETI		Y-ST-ZIP		Channe	T Addition
TITLE		L_ OFFEII		1		∐ Change	■ Addition
NAME	1		6.2 NAN				
	ł.		1				
STREET ADORESS			1	HEET ADDRESS			

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 made under path; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes, and that my same appears in Block 12 or Block 13 if changed, or on an attachment with an address.