

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000008830

FILED  
Jan 29, 2007  
Secretary of State

Entity Name: THE SHEPHERD'S CHURCH, INC.

**Current Principal Place of Business:**

5515 RAINBOW LANE  
CRESTVIEW, FL 32539

**New Principal Place of Business:**

**Current Mailing Address:**

5602 BUCK WARD ROAD  
BAKER, FL 32531

**New Mailing Address:**

FEI Number: 02-0560539

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

BISHOP, JAMES M  
5602 BUCK WARD ROAD  
BAKER, FL 32531 US

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

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: BRACEWELL, DAVID  
Address: 370 JOHNS ROAD  
City-St-Zip: HOLT, FL 32564

Title: VP ( ) Delete  
Name: FORT, NATHAN R  
Address: 5515 RAINBOW LANE  
City-St-Zip: CRESTVIEW, FL 32539

Title: ST ( ) Delete  
Name: BISHOP, JAMES M  
Address: 5602 BUCK WARD ROAD  
City-St-Zip: BAKER, FL 32531

Title: D ( ) Delete  
Name: INFINGER, MICHAEL  
Address: 86 E. EDGEWATER DRIVE  
City-St-Zip: FREEPORT, FL 32439

**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:

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 Chapter 119, 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: JAMES M. BISHOP

ST

01/29/2007

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date