

**2003 NOT-FOR-PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
Apr 28, 2003 8:00 am
Secretary of State

04-28-2003 91391 024 ****61.25

DOCUMENT # N02000002482

1. Entity Name

THE SHEPHERD'S FAMILY CHURCH, INC.



Principal Place of Business

**105 S. MAYO ST.
CRYSTAL BEACH FL 34681**

Mailing Address

**P.O. BOX 742
CRYSTAL BEACH FL 34681**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

1119 Illinois Ave.

Suite, Apt. #, etc.

P.O. Box 742

City & State

Palm Harbor, Florida

City & State

Crystal Beach, FL ~~34681~~

Zip

34683

Country

U.S.A.

Zip

34681

Country

U.S.A.

4. FEI Number

EIN 42-1536808

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

☒ CHECK HERE IF MAKING CHANGES



6. Name and Address of Current Registered Agent

**LANE, JEFFERY P
105 S. MAYO ST.
CRYSTAL BEACH FL 34681**

7. Name and Address of New Registered Agent

Name

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

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating.)

DATE

Rev. Jeffery P. Lane

4/23/03

FILE NOW: FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

**Make Check Payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	D	<input type="checkbox"/> Delete
NAME	LANE, JEFFERY P	
STREET ADDRESS	105 S. MAYO ST.	
CITY-ST-ZIP	CRYSTAL BEACH FL 34681	
TITLE	D	<input type="checkbox"/> Delete
NAME	LANE, REBECCA M	
STREET ADDRESS	105 S. MAYO ST.	
CITY-ST-ZIP	CRYSTAL BEACH FL 34681	
TITLE	D	<input type="checkbox"/> Delete
NAME	LANE, JESSICA	
STREET ADDRESS	105 S. MAYO ST.	
CITY-ST-ZIP	CRYSTAL BEACH FL 34681	
TITLE	D	<input type="checkbox"/> Delete
NAME	WETOR, RYAN	
STREET ADDRESS	5722 BITTERSWEET	
CITY-ST-ZIP	HOLIDAY FL 34690	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Swingle, Jessica	
STREET ADDRESS	31790 U.S. Hwy 19 N. Apt. 150	
CITY-ST-ZIP	Crystal Palm Harbor, FL 34684	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

JEFFERY P. LANE

Jeffery P. Lane 4/23/03

CR2E037 (10/02)