

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000000444

FILED
Feb 16, 2010
Secretary of State

Entity Name: SHEPHARD'S FOLD, INC.

Current Principal Place of Business:

JULIE O'CONNELL
2016 CORNELL AVE
WINTER PARK, FL 32789 US

New Principal Place of Business:

JULIE O'CONNELL
2016 CORNELL AVE
WINTER PARK, FL 32789 US

Current Mailing Address:

JULIE O'CONNELL
2016 CORNELL AVE
WINTER PARK, FL 32789 US

New Mailing Address:

FEI Number: 02-0669662 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

O'CONNELL, JULIE A P
2016 CORNELL AVE
WINTER PARK, FL 32789 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: D/P
Name: O'CONNELL, JULE
Address: 2016 CORNELL AVE
City-St-Zip: WINTER PARK, FL 32789

Title: D
Name: ARMSTRONG, ERNA
Address: 110 NE 7TH AVE
City-St-Zip: HIGH SPRINGS, FL 32643

Title: D/VP
Name: FLEMING, JACALYN M
Address: 2016 CORNELL AVE
City-St-Zip: WINTER PARK, FL 32789

Title: D/FA
Name: GERRI, FRANCHINI
Address: C/O HECHT 485 SEVEN FARMS DR, APT #332
City-St-Zip: DANIEL'S ISLAND, SC 29492

Title: D
Name: O'CONNELL, AARON
Address: 1416 E. LIVINGSTON ST.
City-St-Zip: ORLANDO, FL 32803

I hereby 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 all other like empowered.

SIGNATURE: JACALYN M.FLEMING

DVP

02/16/2010

Electronic Signature of Signing Officer or Director

Date