2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 01, 2006
Secretary of State

DOCUMENT# N03000000855

Entity Name: SHEPHERD'S CARE MINISTRIES OF TAMPA BAY, INC.

Current Principal Place of Business:

1109 E. OSBORNE AVENUE
TAMPA, FL 33603 US

New Principal Place of Business:

9108 PEBBLE CREEK DRIVE
TAMPA, FL 33647 US

Current Mailing Address:

1109 E. OSBORNE AVENUE
TAMPA, FL 33603 US

New Mailing Address:

9108 PEBBLE CREEK DRIVE
TAMPA, FL 33647 US

FEI Number: 14-1866193 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

KIRKLAND, SAMUEL O SR.
1109 E. OSBORNE AVENUE
TAMPA, FL 33603 US

Name and Address of New Registered Agent:

KIRKLAND, SAMUEL O SR.
9108 PEBBLE CREEK DRIVE
TAMPA, FL 33647 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: 02/01/2006
Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: KIRKLAND, SAMUEL O SR
Address: 1109 E. OSBORNE AVENUE
City-St-Zip: TAMPA, FL 33603

Title: VP ( ) Delete
Name: KIRKLAND, KATIE M
Address: 1109 E. OSBORNE AVENUE
City-St-Zip: TAMPA, FL 33603

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition
Name: KIRKLAND, SAMUEL O SR
Address: 9108 PEBBLE CREEK DRIVE
City-St-Zip: TAMPA, FL 33647

Title: VP (X) Change ( ) Addition
Name: KIRKLAND, KATIE M
Address: 9108 PEBBLE CREEK DRIVE
City-St-Zip: TAMPA, FL 33647

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: SAMUEL O. KIRKLAND P 02/01/2006
Electronic Signature of Signing Officer or Director — Date