2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000008399

FILED Jul 07, 2004 Secretary of State

Entity Name: SHEPHERD'S WAY COMMUNITY CHURCH, INC. **Current Principal Place of Business: New Principal Place of Business:** 10488 HAZEL STREET 4020 58TH ST. N SEMINOLE, FL 33778 ST. PETERSBURG, FL 33714 **Current Mailing Address: New Mailing Address:** 10488 HAZEL STREET SEMINOLE, FL 33778 FEI Number: 20-0329229 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: RIES, JOHN KEPNER, KEN PASTOR 10488 HAZEL STREET 10488 HAZEL STREET SEMINOLE, FL 33778 SEMINOLE, FL 33778 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: KENNETH W. KEPNER 07/07/2004 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change (X) Addition KEPNER, KENNETH W P Name: Name: Address: Address: 10488 HAZEL ST. City-St-Zip: City-St-Zip: SEMINOLE, FL 33778 Title: Title: () Change (X) Addition () Delete KEPNER, CAROL A T Name: Name: Address: Address: 10488 HAZEL ST. City-St-Zip: City-St-Zip: SEMINOLE, FL 33778 Title: () Delete Title: DIR () Change (X) Addition Name: RIES, JOHN A VP Name: 2620 56TH ST. S. Address: Address: City-St-Zip: City-St-Zip: GULFPORT, FL 33707 Title: () Delete Title: DIR () Change (X) Addition Name: Name: RIES, BARBARA D S Address: Address: 2620 56 ST. S. City-St-Zip: City-St-Zip: GULFPORT, FL 33707

I hereby certify that the information supplied with this filing does not qualify for the 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 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: PASTOR KENNETH W. KEPNER Ρ 07/07/2004