

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000005239

FILED
Jan 29, 2007
Secretary of State

Entity Name: CHURCH OF THE GOOD SHEPHERD CHRISTIAN MINISTRIES, INC.

Current Principal Place of Business:

900 N OCEAN BLVD
9
POMPANO BEACH, FL 33062

New Principal Place of Business:

Current Mailing Address:

900 N OCEAN BLVD
9
POMPANO BEACH, FL 33062

New Mailing Address:

FEI Number: 20-1108099

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CROMPTON, MARK PASTOR
900 N OCEAN BLVD
9
POMPANO BEACH, FL 33062 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: PD () Delete
Name: CROMPTON, MARK PASTOR
Address: 900 N OCEAN BLVD #9
City-St-Zip: POMPANO BEACH, FL 33062

Title: ED () Delete
Name: CROMPTON, GRACE REV
Address: 345 SW 33RD TERR
City-St-Zip: DEERFIELD BEACH, FL 33442

Title: ED () Delete
Name: FISCHER, MARTIN REV
Address: 900 N OCEAN BLVD #4
City-St-Zip: POMPANO BEACH, FL 33062

Title: SD () Delete
Name: BEYRENT, KIMAREE
Address: 345 SW 33RD TERR
City-St-Zip: DEERFIELD BEACH, FL 33442

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: ED (X) Change () Addition
Name: CROMPTON, GRACE REV
Address: 900 N OCEAN BLVD, #9
City-St-Zip: POMPANO BEACH, FL 33062

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: ED () Change (X) Addition
Name: RODRIGUEZ, JOE REV
Address: 6555 WEST 26TH DRIVE #21-35
City-St-Zip: HIALEAH, FL 33016

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: MARK A. CROMPTON

PD

01/29/2007

Electronic Signature of Signing Officer or Director

Date