

# **2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N05000002210

**FILED**  
**Feb 16, 2010**  
**Secretary of State**

**Entity Name:** SHEPHERD'S GATHERING, INC.

**Current Principal Place of Business:**

133 WADING BIRD CIRCLE  
#206  
NAPLES, FL 34110 US

**New Principal Place of Business:**

**Current Mailing Address:**

133 WADING BIRD CIRCLE  
#206  
NAPLES, FL 34110 US

**New Mailing Address:**

**FEI Number:** 20-2284991

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

**Name and Address of Current Registered Agent:**

KRAUS, MAUREEN T  
133 WADING BIRD CIRCLE  
#206  
NAPLES, FL 34110 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  
**Name:** KRAUS, MAUREEN T  
**Address:** 133 WADING BIRD CIRCLE #206  
**City-St-Zip:** NAPLES, FL 34110 US

**Title:** TD  
**Name:** ABRAMS, TERESA  
**Address:** 140 PALM RIVER BLVD.  
**City-St-Zip:** NAPLES, FL 34110 US

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:** MAUREEN T. KRAUS

PD

02/16/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date