2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 08, 2007
Secretary of State

DOCUMENT# N05000005024

Entity Name: GOOD SHEPHERD, INC.

Current Principal Place of Business:

880 NW 1ST AVE.
BOCA RATON, FL 33432

New Principal Place of Business:

Current Mailing Address:

880 NW 1ST AVE.
BOCA RATON, FL 33432

New Mailing Address:

FEI Number: 20-2840058 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

BACZEWSKI, CHRIS
455 NE 2ND STREET
BOCA RATON, FL 33432 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: BACZEWSKI, CHRIS
Address: 455 NE 2ND STREET
City-St-Zip: BOCA RATON, FL 33432

Title: V ( ) Delete
Name: WHITE, JOHN
Address: 466 NE 32 ST.
City-St-Zip: BOCA RATON, FL 33431

Title: SD ( ) Delete
Name: BACZEWSKI, DAWN
Address: 455 NE 2ND STREET
City-St-Zip: BOCA RATON, FL 33432

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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: CHRIS BACZEWSKI PD 01/08/2007

Electronic Signature of Signing Officer or Director — Date