

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000008909

FILED  
Jul 11, 2008  
Secretary of State

**Entity Name:** FEED MY SHEEP MINISTRY OF GOD, INC.

**Current Principal Place of Business:**

4823 CAINS WREN TRAIL  
SANFORD, FL 32771

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 2581  
SANFORD, FL 32772

**New Mailing Address:**

**FEI Number:** 71-1014338      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

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

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

SCHOFIELD, PRESTON L CEO  
4823 CAINS WREN TRAIL  
SANFORD, FL 32771 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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: C ( ) Delete  
Name: IZQUIERDO, SYLVIA D  
Address: 680 BROOKFIELD LOOP  
City-St-Zip: LAKE MARY, FL 32746

Title: VC ( ) Delete  
Name: COOPER, CAROLYN  
Address: 1197 GULF STAR DR P  
City-St-Zip: LAKE MARY, FL 32746

Title: S ( ) Delete  
Name: STARLING, JULIA  
Address: 14104 STONE BROOK DR  
City-St-Zip: SANFORD, FL 32773

Title: T ( ) Delete  
Name: FITZGERALD, YVONNE  
Address: 8009 BIRMAN ST  
City-St-Zip: MAITLAND, FL 32751

**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:

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

I hereby certify that the information supplied with this filing does not qualify 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: PRESTON L. SCHOFIELD

CEO

07/11/2008

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

\_\_\_\_\_  
Date