

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N09000000551

FILED
Jan 11, 2010
Secretary of State

Entity Name: SHEPHERD MISSION FELLOWSHIP, INC.

Current Principal Place of Business:

5390 BLUE ANGEL PARKWAY
PENSACOLA, FL 32526

New Principal Place of Business:

Current Mailing Address:

5390 BLUE ANGEL PARKWAY
PENSACOLA, FL 32526

New Mailing Address:

FEI Number: 26-4092813

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FURCHES, TIMOTHY
5390 BLUE ANGEL PARKWAY
PENSACOLA, FL 32526 US

Name and Address of New Registered Agent:

FURCHES, TIMOTHY M
6649 KLONDIKE ROAD
PENSACOLA, FL 32526 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: TIMOTHY FURCHES

01/11/2010

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD
Name: FURCHES, TIMOTHY
Address: 6649 KLONDIKE ROAD
City-St-Zip: PENSACOLA, FL 32526

Title: SD
Name: STEPHENS, THOMAS
Address: 1145 BOND STREET
City-St-Zip: PENSACOLA, FL 32506

Title: D
Name: HEWETT, LUTHER
Address: 2490 FARRIS AVENUE
City-St-Zip: PENSACOLA, FL 32526

Title: D
Name: WILLIAMS, SHIRLEY
Address: 27 SEMINOLE TRAIL
City-St-Zip: PENSACOLA, FL 32506

Title: T
Name: BLACK, JANET
Address: POST OFFICE BOX 3237
City-St-Zip: PENSACOLA, FL 32516

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: TIMOTHY FURCHES

RA

01/11/2010

Electronic Signature of Signing Officer or Director

Date