

2009 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

FILED
Oct 11, 2009
Secretary of State

DOCUMENT# N26723

Entity Name: SHEPHERD OF THE COAST EVANGELICAL LUTHERAN CHURCH OF PALM COAST, FLORIDA, INC.

Current Principal Place of Business:

101 PINELAKES PKWY
PALM COAST, FL 32164 US

New Principal Place of Business:

101 PINE LAKES PKWY
PALM COAST, FL 32164 US

Current Mailing Address:

101 PINELAKES PKWY
PALM COAST, FL 32164 US

New Mailing Address:

101 PINE LAKES PKWY
PALM COAST, FL 32164 US

FEI Number: 59-2873204 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)
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:

DENBY, DON
70 LAGARE ST.
PALM COAST, FL 32137 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: DONALD J. DENBY

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: DENBY, DON
Address: 70 LAGARE ST.
City-St-Zip: PALM COAST, FL 32137

Title: TD () Delete
Name: DAVIS, SUSAN J
Address: 23 WOODLYN LN
City-St-Zip: PALM COAST, FL 32164

Title: V () Delete
Name: ORE, BUD
Address: 137 PARKVIEW DR.
City-St-Zip: PALM COAST, FL 32164

Title: D () Delete
Name: ROSS, BOB
Address: 11 WARNER PL
City-St-Zip: PALM COAST, FL 32164

Title: D () Delete
Name: RHODES, DIOK
Address: 11 PKWY DR
City-St-Zip: PALM COAST, FL 32164

Title: S () Delete
Name: CHEATHAM, KELLT
Address: 31A PONY LN
City-St-Zip: PALM COAST, FL 32164

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: D (X) Change () Addition
Name: DELLE DONNE, DON
Address: 5600 N. OCEANSHORE BLVD
City-St-Zip: PALM COAST, FL 32137

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

Title: S (X) Change () Addition
Name: POLICASTRO, KATHERYN
Address: 20 BURGESS PLACE
City-St-Zip: PALM COAST, FL 32167

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: SUSAN J. DAVIS

TD

10/11/2009

Electronic Signature of Signing Officer or Director

Date