

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# N30564

FILED
Sep 03, 2002
Secretary of State

Entity Name: THE SHEPHERD'S SANCTUARY, INCORPORATED

Current Principal Place of Business:

3325 GRIFFIN RD
SUITE 177
FT LAUDERDALE, FL 33312 US

New Principal Place of Business:

Current Mailing Address:

3325 GRIFFIN RD
SUITE 177
FT LAUDERDALE, FL 33312 US

New Mailing Address:

FEI Number: 65-0087707 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WILSON, DEBORAH D
3325 GRIFFIN RD
#177
FT LAUDERDALE, FL 33312 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: WILSON, EUGENE
Address: 3325 GRIFFIN RD. #177
City-St-Zip: FT LAUDERDALE, FL 33312 US

Title: VPTD () Delete
Name: WILSON, DEBORAH
Address: 3325 GRIFFIN RD. #177
City-St-Zip: FT LAUDERDALE, FL 33312 US

Title: VPD () Delete
Name: BERNARD, PHILLIP
Address: 3325 GRIFFIN RD. #177
City-St-Zip: FT LAUDERDALE, FL 33312 US

Title: D () Delete
Name: SEIDNER, LEIGH
Address: 640 SW 158TH LANE
City-St-Zip: SUNRISE, FL 33326

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 for the exemption stated in Section 119.07(3)(i), 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: DEBORAH D. WILSON

VPTD

09/03/2002

Electronic Signature of Signing Officer or Director

_____ Date