


2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 28, 2005 8:00 am
Secretary of State

04-28-2005 90148 015 ****69.00

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DOCUMENT # N34955			
1. Entity Name GOOD SHEPHERD LUTHERAN CHURCH, INC.			
Principal Place of Business 1201 NW 27TH AVE FT. LAUDERDALE, FL 33311		Mailing Address 1201 NW 27TH AVE FT. LAUDERDALE, FL 33311	
2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country
4. FEI Number NOT APPLICABLE		Applied For Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent		7. Name and Address of New Registered Agent	
LANE, PAUL W 610 SW 38 AVE. APT 305 A1 FT LAUDERDALE, FL 33312		Name Lane, Paul W. Street Address (P.O. Box Number is Not Acceptable) 610 SW 38th Avenue City Fort Lauderdale FL Zip Code 33312	
8. 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. I am familiar with, and accept the obligations of registered agent.			
SIGNATURE <i>Paul W Lane</i> President		DATE 4/24/05	
Signature, typed or printed name of registered agent and title if applicable.		(NOTE: Registered Agent signature required when reinstating)	
Filing Fee is \$61.25 Due by May 1, 2005		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
		Make check payable to Florida Department of State	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D WILSON, DAMEON 3641 NW 7TH COURT FT LAUDERDALE, FL <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	FS LANE, TOMIKA L 610 SW 38TH AVENUE FORT LAUDERDALE, FL 33312 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD SMITH, JANNICE H 1331 NW 58 AVE LAUDERHILL, FL 33313 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD Smith, Jannice H <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 1130 Sussex Drive #1519 North Lauderdale, FL 33068
TITLE NAME STREET ADDRESS CITY-ST-ZIP	STD JONES, ANNA 322 EAST DIXIE COURT FT LAUDERDALE, FL <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V HORNE, ULYSSES G 8939 NW 44 CT SUNRISE, FL 3351 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	V Myers, Herbert <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition 1811 NW 26th Terrace Fort Lauderdale, FL 33311
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD LANE, PAUL W 610 SW 38TH AVE FT LAUDERDALE, FL 33312 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.			
SIGNATURE: <i>Jannice H Smith</i>		DATE 4/25/05 954-722-6257	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date Daytime Phone #	