


2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 27, 2007 8:00 am
Secretary of State

04-27-2007 90200 047 ****70.00

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

40086128



2. Principal Place of Business - No P.O. Box #
 1201 NW 27th Ave

3. Mailing Address
 1201 NW 27th Ave

Suite, Apt. #, etc.

04202007 Chg-NP CR2E037 (12/06)

City & State
 Fort Lauderdale, FL

City & State
 Fort Lauderdale, FL

Zip
 33312

Country
 U.S.A.

Zip
 33312

Country
 USA

4. FEI Number
 NOT APPLICABLE

Applied For
 Not Applicable

5. Certificate of Status Desired \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

LANE, PAUL W
 610 SW 38 AVE.
 FT LAUDERDALE, FL 33312

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL Zip Code

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 Paul W Lane

Signature, typed or printed name of registered agent and fee if applicable (NOTE: Registered Agent signature required when reinstating) DATE

Filing Fee is \$61.25 Due by May 1, 2007

9. Election Campaign Financing Trust Fund Contribution. \$5.00 May Be Added to Fees

Make check payable to Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE	D	<input type="checkbox"/> Delete
NAME	WILSON, DAMEON	
STREET ADDRESS	3641 NW 7TH COURT	
CITY-ST-ZIP	FT LAUDERDALE, FL	
TITLE	STD	<input type="checkbox"/> Delete
NAME	JONES, ANNA	
STREET ADDRESS	322 EAST DIXIE COURT	
CITY-ST-ZIP	FT LAUDERDALE, FL	
TITLE	PD	<input type="checkbox"/> Delete
NAME	LANE, PAUL W	
STREET ADDRESS	610 SW 38TH AVE	
CITY-ST-ZIP	FT LAUDERDALE, FL 33312	
TITLE	<u>Jannille Smith</u>	<input type="checkbox"/> Delete
NAME	<u>Jannille Smith</u>	
STREET ADDRESS	<u>6875 Landings Drive</u>	
CITY-ST-ZIP	<u>Lauderhill, Florida 33319</u>	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	STD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Jones Anna	
STREET ADDRESS	955 SW 2nd Street	
CITY-ST-ZIP	Fort Lauderdale, FL 33312	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	STD	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Jannille Smith	
STREET ADDRESS	6875 Landings Drive Apt 206	
CITY-ST-ZIP	Lauderhill, Florida 33319	
TITLE	CT	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	SeQuincy Pratt	
STREET ADDRESS	3911 SW 52nd Ave #1-6	
CITY-ST-ZIP	Pembroke Pines, FL 33023	
TITLE	VTD	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Sandra Jackson	
STREET ADDRESS	7631 NW 38 Court	
CITY-ST-ZIP	Surprise, FL 33351	

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: Paul W Lane

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #