

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N34955

FILED
Feb 22, 2009
Secretary of State

Entity Name: GOOD SHEPHERD LUTHERAN CHURCH, INC.

Current Principal Place of Business:

1201 NW 27TH AVE
FT. LAUDERDALE, FL 33311

New Principal Place of Business:

Current Mailing Address:

1201 NW 27TH AVE
FT. LAUDERDALE, FL 33311

New Mailing Address:

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

Name and Address of Current Registered Agent:

LANE, PAUL W
610 SW 38 AVE.
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: D () Delete
Name: WILSON, DAMEON,
Address: 3641 NW 7TH COURT
City-St-Zip: FT LAUDERDALE, FL

Title: STD () Delete
Name: SMITH, JANNICE
Address: 6875 LANDINGS DRIVE APT 206
City-St-Zip: LAUDERHILL, FL 33319

Title: PD () Delete
Name: LANE, PAUL W
Address: 610 SW 38TH AVE
City-St-Zip: FT LAUDERDALE, FL 33312

Title: STD () Delete
Name: JONES, ANNA
Address: 955 SW 2ND STREET
City-St-Zip: FORT LAUDERDALE, FL 33312

Title: CT () Delete
Name: PRATT, SEQUINCY
Address: 3911 SW 52ND AVE. #1-6
City-St-Zip: HOLLYWOOD, FL 33023

Title: VTD () Delete
Name: JACKSON, SANDRA
Address: 7631 NW 38 COURT
City-St-Zip: SUNRISE, FL 33351

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
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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 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: JANNICE SMITH

STD

02/22/2009

Electronic Signature of Signing Officer or Director

_____ Date