2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N39258

FILED Mar 29, 2006 Secretary of State

Entity Name: THE EPISCOPAL CHURCH OF THE GOOD SHEPHERD OF TEQUESTA, INC.

Current Principal Place of Business: New Principal Place of Business: 400 SEABROOK ROAD TEQUESTA, FL 33469 US **Current Mailing Address: New Mailing Address:** 400 SEABROOK ROAD TEQUESTA, FL 33469 US FEI Number: 59-1201052 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: TAYLOR, ROBERT S P TAYLOR, ROBERT S REV. 400 SEABROOK ROAD 400 SEABROOK ROAD US TEQUESTA, FL 33469 US TEQUESTA, FL 33469 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: ROBERT S. TAYLOR 03/29/2006 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition GREENE, MIKEL Name: Name: 154 BAYBERRY CIRCLE Address: Address: City-St-Zip: JUPITER, FL 334587709 US City-St-Zip: Title: () Delete Title: () Change () Addition TAYLOR, ROBERT S Name: Name: Address: 296 RIVER DRIVE Address: City-St-Zip: TEQUESTA, FL 334691936 US City-St-Zip: Title: () Delete Title: () Change () Addition BALLARD, ANN G Name: Name: 19359 GULFSTREAM DR Address: Address: City-St-Zip: TEQUESTA, FL 33469 US City-St-Zip: Title: () Delete Title: (X) Change () Addition PROSSER, JOHN Name: Name: HART, PHIL DR Address: 11953 174TH CT N Address: 7973 SEQUOIA DR City-St-Zip: JUPITER, FL 33478 US City-St-Zip: HOBE SOUND, FL 33455 US Title: () Delete Title: () Change () Addition EBNER, RALPH Name: Name: 8144 SE CYPRESS POINT PL Address: Address: City-St-Zip: HOBE SOUND, FL 33455 US City-St-Zip: Title: () Delete Title: (X) Change () Addition HART, PHIL CONNELL, STAN Name: Name: Address: 7973 SE SEQUIOA DR Address: 101 SEASHORE LANE HOBE SOUND, FL 33455 US JUPITER, FL 33477 US City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: ANN G BALLARD S 03/29/2006