

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N39258

FILED
Apr 20, 2009
Secretary of State

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

Current Principal Place of Business:

400 SEABROOK ROAD
TEQUESTA, FL 33469 US

New Principal Place of Business:

Current Mailing Address:

400 SEABROOK ROAD
TEQUESTA, FL 33469 US

New Mailing Address:

FEI Number: 59-1201052 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

TAYLOR, ROBERT S REV.
400 SEABROOK ROAD
TEQUESTA, FL 33469 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: T () Delete
Name: GREENE, MIKEL
Address: 154 BAYBERRY CIRCLE
City-St-Zip: JUPITER, FL 334587709 US

Title: P () Delete
Name: TAYLOR, ROBERT S
Address: 296 RIVER DRIVE
City-St-Zip: TEQUESTA, FL 334691936 US

Title: S () Delete
Name: BALLARD, ANN G
Address: 19359 GULFSTREAM DR
City-St-Zip: TEQUESTA, FL 33469 US

Title: D () Delete
Name: PROSSER, JOHN MR
Address: 11953 174TH CT N
City-St-Zip: JUPITER, FL 33478 US

Title: D () Delete
Name: SCHUPPERT, LAURA MRS
Address: 19394 W INDIES LANE
City-St-Zip: TEQUESTA, FL 33469 US

Title: D () Delete
Name: CONNELL, STAN MR
Address: 3303 FAIRWAY DR N
City-St-Zip: JUPITER, FL 33477 US

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:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change () Addition
Name: DOWNING, DAVID MR
Address: 320 RIVERSIDE DR
City-St-Zip: JUPITER, FL 33469 US

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: ANN G. BALLARD

S

04/20/2009

Electronic Signature of Signing Officer or Director

Date