


**2003 NOT-FOR-PROFIT CORPORATION  
UNIFORM BUSINESS REPORT (UBR)**

**FILED**  
**Apr 07, 2003 8:00 am**  
**Secretary of State**

04-07-2003 90118 044 \*\*\*\*70.00

**DOCUMENT # N39258**

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



Principal Place of Business  
**400 SEABROOK ROAD  
TEQUESTA FL 33469  
PB**

Mailing Address  
**400 SEABROOK ROAD  
TEQUESTA FL 33469**



CHECK HERE IF MAKING CHANGES

2. Principal Place of Business  
Suite, Apt. #, etc.  
City & State  
Zip Country

3. Mailing Address  
Suite, Apt. #, etc.  
City & State  
Zip Country

4. FEI Number **59-1201052** Applied For  
 Not Applicable

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

6. Name and Address of Current Registered Agent  
**TAYLOR, ROBERT S.  
400 SEABROOK ROAD  
TEQUESTA FL 33469**

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

**FILE NOW: FEE IS \$61.25**

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	<b>D</b>	<input type="checkbox"/> Delete
NAME	<b>GREENE, MIKEL</b>	
STREET ADDRESS	<b>154 BAYBERRY CIRCLE</b>	
CITY-ST-ZIP	<b>JUPITER FL 33458-7709</b>	
TITLE	<b>P</b>	<input type="checkbox"/> Delete
NAME	<b>TAYLOR, ROBERT S.</b>	
STREET ADDRESS	<b>296 RIVER DRIVE</b>	
CITY-ST-ZIP	<b>TEQUESTA FL 33469-1936</b>	
TITLE	<b>D</b>	<input checked="" type="checkbox"/> Delete
NAME	<b>BAILEY, KATHRYN</b>	
STREET ADDRESS	<b>242 VILLAGE BLVD #2101</b>	
CITY-ST-ZIP	<b>TEQUESTA FL 33469</b>	
TITLE	<b>D</b>	<input checked="" type="checkbox"/> Delete
NAME	<b>BEHL, BARBARA</b>	
STREET ADDRESS	<b>10281 SE BANYAN WAY</b>	
CITY-ST-ZIP	<b>TEQUESTA FL 33469</b>	
TITLE	<b>D</b>	<input type="checkbox"/> Delete
NAME	<b>ADAMS, BARBARA</b>	
STREET ADDRESS	<b>18081 SE COUNTRY CLUB DR #33</b>	
CITY-ST-ZIP	<b>TEQUESTA FL 33469</b>	
TITLE	<b>D</b>	<input type="checkbox"/> Delete
NAME	<b>GUSTAFSON, BARBARA</b>	
STREET ADDRESS	<b>303 SWEET BAY CIRCLE</b>	
CITY-ST-ZIP	<b>JUPITER FL 33458</b>	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	<b>T</b>	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>GREENE, MIKEL</b>	
STREET ADDRESS	<b>154 BAYBERRY CIRCLE</b>	
CITY-ST-ZIP	<b>JUPITER FL 33458-7709</b>	
TITLE	<b>S</b>	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	<b>BALLARD ANN G</b>	
STREET ADDRESS	<b>19359 GULFSTREAM DR</b>	
CITY-ST-ZIP	<b>JUPITER FL 33469</b>	
TITLE	<b>D</b>	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	<b>CASEY, DEBBIE</b>	
STREET ADDRESS	<b>5852 STONEWOOD CT.</b>	
CITY-ST-ZIP	<b>JUPITER FL 33458-7934</b>	
TITLE	<b>D</b>	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	<b>GOZZO, SANDY</b>	
STREET ADDRESS	<b>18767 SE RIVER RIDGE</b>	
CITY-ST-ZIP	<b>TEQUESTA FL 33469</b>	
TITLE	<b>D</b>	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	<b>GRAHAM, DAVID</b>	
STREET ADDRESS	<b>2314 23RD CT.</b>	
CITY-ST-ZIP	<b>JUPITER FL 33477</b>	
TITLE	<b>D</b>	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	<b>HANSON, CHARLES</b>	
STREET ADDRESS	<b>300 OCEAN TRAIL WAY #410</b>	
CITY-ST-ZIP	<b>JUPITER FL 33477-7709</b>	

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: ANN G. BALLARD **ANN G. BALLARD 04/03/03 561-746-4674**

CR2E037 (10/02)

Attachment

90072507  
# N39258

The Episcopal Church of the Good Shepherd of Tequesta, Inc.  
400 Seabrook Road  
Tequesta, FL 33469

Murray, Brent	135 Lighthouse Dr.	Jupiter Inlet	FL	33469	D
Paul, Joseph	137 Dunes Edge Rd.	Jupiter	FL	33477	D
Pollard, Marcia	130 Lighthouse DR.	Jupiter	FL	33469	D
Prosser, John	11953 174th Court, N.	Jupiter	FL	33478	D
Sharpless, William	325 Fairway North	Tequesta	FL	33469-1958	D
<del>Taylor, Robert</del>	<del>296 River Dr.</del>	<del>Tequesta</del>	<del>FL</del>	<del>33469-1936</del>	<del>P</del>
Wrist, Peter	7778 SE Country Estates Way	Jupiter	FL	33458-1042	D