

FILE NOW: FILING FEE IS \$61.25

FILED
Mar 02, 1999 8:00 am
Secretary of State

03-02-1999 90116 042 ****61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N43738

1. Corporation Name

GOOD SHEPHERD WORLD MISSION, INC.

Principal Place of Business

18417 IRIS RD.
FORT MYERS, FL 33912

Mailing Address

18417 IRIS RD.
FORT MYERS, FL 33912



2. Principal Place of Business

21 **BONITA SPRINGS**

Suite, Apt. #, etc.

22

City & State

23 **BONITA SPRINGS FL**

Zip

Country

24 **34135**

25 **USA**

2a. Mailing Address

26 **18417 IRIS RD.**

Suite, Apt. #, etc.

27

City & State

28 **FORT MYERS FL**

Zip

Country

29 **33912**

30 **LEE**

3. Date Incorporated or Qualified

06/03/1991

4. FEI Number

58-2982671

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing ☐

Trust Fund Contribution

\$5.00 May Be
Added to Fees

9. Name and Address of Current Registered Agent

GARCIA, REV GEORGE A.
18417 IRIS RD
FT. MYERS FL 33912

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

REV GEORGE GARCIA

SIGNATURE

Signature, typed or printed name of registered agent and title, applicable.

(NOTE: Registered Agent signature required when reinstating)

1/18/1999

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

NAME **DP**
GARCIA, GEORGE A REV
STREET ADDRESS **18417 IRIS RD**
CITY-ST-ZIP **FT. MYERS FL 33912**

TITLE ☐ DELETE

NAME **DV**
TORRES, JUAN
STREET ADDRESS **19149 COCONUT RD**
CITY-ST-ZIP **FT. MYERS FL 33912**

TITLE ☐ DELETE

NAME **S**
TORRES, SONIA
STREET ADDRESS **19149 COCONUT RD**
CITY-ST-ZIP **FT MYERS FL 33912**

TITLE ☐ DELETE

NAME **T**
GARCIA, MILAGROS
STREET ADDRESS **18417 IRIS RD**
CITY-ST-ZIP **FT MYERS FL 33912**

TITLE ☐ DELETE

NAME **D**
MELENDEZ, BERTHA
STREET ADDRESS **11381 REDBUD LANE**
CITY-ST-ZIP **BONITA SPRINGS FL 34135**

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME **DP**
REV. GEORGE A GARCIA
1.3 STREET ADDRESS **18417 IRIS RD**
1.4 CITY-ST-ZIP **FORT MYERS FL 33912**

2.1 TITLE ☒ Change ☐ Addition

2.2 NAME **V**
MILAGROS GARCIA
2.3 STREET ADDRESS **18417 IRIS RD**
2.4 CITY-ST-ZIP **FORT MYERS FL, 33912**

3.1 TITLE ☒ Change ☐ Addition

3.2 NAME **S**
SARAY GARCIA
3.3 STREET ADDRESS **18417 IRIS RD**
3.4 CITY-ST-ZIP **FORT MYERS FL, 33912**

4.1 TITLE ☒ Change ☐ Addition

4.2 NAME **T**
ABIGAIL RIVERA
4.3 STREET ADDRESS **6905 SHANNON DV**
4.4 CITY-ST-ZIP **FORT PIERCE FL 34951**

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME **D**
BERTHA MELENDEZ
5.3 STREET ADDRESS **11381 REDBUD LANE**
5.4 CITY-ST-ZIP **BONITA SPRINGS FL 34135**

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: REV. GEORGE GARCIA

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/18/1999. 941-590 0105

Date

Daytime Phone #

CR2E037 (4/1/98)