2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N49017

FILED Feb 08, 2007 Secretary of State

Entity Name: GOOD SHEPHERD UNITED METHODIST CHURCH OF NORTH FORT MYERS, INC.

Current Principal Place of Business: New Principal Place of Business:

2951 TRAIL DAIRY CIR NO FT MYERS, FL 33917 US

Current Mailing Address: New Mailing Address:

2951 TRAIL DAIRY CIR N FT MYERS, FL 33917 US

FEI Number: 65-0336641 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

MIHOK, SANDRA
236 LAS PALMAS BLVD
HILBISH, RUSS
530 CATALINA DRIVE

NORTH FORT MYERS, FL 33903 US NORTH FORT MYERS, FL 33903 US

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: RUSS HILBISH 02/08/2007

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

itle: PD () Delete Title: PD (X) Change () Addition

Name:MIHOK, SANDRAName:HILBISH, RUSSAddress:236 LAS PALMAS BLVDAddress:530 CATALINA DRIVE

City-St-Zip: NORTH FT. MYERS, FL 33903 US City-St-Zip: NORTH FT. MYERS, FL 33903 US

Title: SD () Delete Title: SD (X) Change () Addition Name: QUINLAN, CATHY STEPHENSON, JIM

Address: 5311 SAN GABRIEL CIRCLE Address: 278 N. AMERS

City-St-Zip: NO FT MYERS, FL 33903 US City-St-Zip: NO FT MYERS, FL 33903 US

Title: VD () Delete Title: VD (X) Change () Addition Name: SHEELEY, WAYNE Name: BODEN, BILL

Address: 2140 RIO NUEVO DRIVE Address: 2220 VALPARAISO BLVD

City-St-Zip: NORTH FORT MYERS, FL 33917 US City-St-Zip: NORTH FORT MYERS, FL 33917 US

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: RUSS HILBISH PD 02/08/2007