2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 09, 2004 08:00 AM
Secretary of State

DOCUMENT # N93000000796

1. Entity Name
E.L. SHEPPARD MINISTRIES, INC.

Principal Place of Business	Mailing Address
POST OFFICE BOX 757 TALLAHASSEE, FL 32302-0757	POST OFFICE BOX 757 TALLAHASSEE, FL 32302-0757

DO NOT WRITE IN THIS SPACE

03312004 No Chg-NP CR2E037 (10/03)

4. FEI Number
59-3168889
☐ Applied For
☐ Not Applicable

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

6. Name and Address of Current Registered Agent

HUNTER, HENRY C SR
219 E. VIRGINIA STREET
TALLAHASSEE, FL 32301

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

Filing Fee is $61.25
Due by May 1, 2004

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

U00000107389
04/09/04-80013-011 61.25

10. OFFICERS AND DIRECTORS

TITLE	D
NAME	GILMORE, ARGATHA
STREET ADDRESS	8146 ELYSIAN WAY
CITY-ST-ZIP	TALLAHASSEE, FL 32311
TITLE	D
NAME	SHEPPARD, DONALD E
STREET ADDRESS	3103 S. FULMER CIRCLE
CITY-ST-ZIP	TALLAHASSEE, FL 32303
TITLE	D
NAME	FLUCAS, ROBERT
STREET ADDRESS	3027 WINDY HILL LANE
CITY-ST-ZIP	TALLAHASSEE, FL
TITLE	D
NAME	FLUCAS, ERVINE
STREET ADDRESS	3027 WINDY HILL LANE
CITY-ST-ZIP	TALLAHASSEE, FL
TITLE	D
NAME	STALLWORTH, THEOTIS SR
STREET ADDRESS	502 DUPONT DR.
CITY-ST-ZIP	TALLAHASSEE, FL 32310
TITLE	D
NAME	CUMMINGS, CONSTANCE
STREET ADDRESS	8124 ELYSIAN WAY
CITY-ST-ZIP	TALLAHASSEE, FL 32311

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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: Henry Hunter Theotis Stallworth 4/2/04 (850) 576-2855
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #