2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N93000000906

FILED Feb 22, 2007 Secretary of State

Entity Name: SHEPHERD'S CENTER OF ORANGE PARK, INC.

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

2105 PARK AVE STE 1

ORANGE PARK, FL 32073 US

Current Mailing Address: New Mailing Address:

2105 PARK AVE STE 1

ORANGE PARK, FL 32073 US

FEI Number: 59-3177835 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:

CLARK, KEITH 997 LAKERIDGE DRIVE ORANGE PARK, FL 32065 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:

Clastrania Ciarachura of Danistana d'Anant

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: C () Delete Title: C (X) Change () Addition
Name: CLARK, KEITH
Address: 997 LAKERIDGE DRIVE CLARK, KEITH
Address: 997 LAKERIDGE DRIVE

Address: 997 LAKERIDGE DRIVE Address: 997 LAKERIDGE DRIVE
City-St-Zip: ORANGE PARK, FL 32065 City-St-Zip: ORANGE PARK, FL 32065 US

Title: VCD () Delete Title: VCD (X) Change () Addition

Name: AGEE, PATSY Name: AGEE, PATSY

 Address:
 2285 MARSH HAWK LANE, #12-102
 Address:
 2285 MARSH HAWK LANE, #12-102

 City-St-Zip:
 ORANGE PARK, FL 32003
 City-St-Zip:
 ORANGE PARK, FL 32003 US

Title: S () Delete Title: S (X) Change () Addition

 Name:
 ELLIOTT, BARBARA
 Name:
 ELLIOTT, BARBARA

 Address:
 2350 EGREMONT DR.
 Address:
 2350 EGREMONT DR.

 City-St-Zip:
 ORANGE PARK, FL 32073
 City-St-Zip:
 ORANGE PARK, FL 32073 US

Title: () Delete Title: ED (X) Change () Addition STEWART, CYNTHIA M EX. DIR Name: CHARPENTIER, ALBERT Name: Address: 4203 WATER OAK LANE Address: 11857 CATRAKEE DRIVE City-St-Zip: JACKSONVILLE, FL 32210 City-St-Zip: JACKSONVILLE, FL 32223 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: CYNTHIA M. STEWART ED 02/22/2007