

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N94000003130

FILED
Apr 15, 2009
Secretary of State

Entity Name: GOOD SHEPHERD LUTHERAN CHURCH OF SEBRING, INC.

Current Principal Place of Business:

4348 SCHUMACHER ROAD
SEBRING, FL 33872 US

New Principal Place of Business:

Current Mailing Address:

5341 LIME RD.
SEBRING, FL 33872 US

New Mailing Address:

5341 LIME RD.
SEBRING, FL 33875 US

FEI Number: 65-0508593

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WEED, JAMES L REV.
5341 LIME RD.
SEBRING, FL 33875 US

Name and Address of New Registered Agent:

WEED, JR., JAMES L REV.
5341 LIME RD.
SEBRING, FL 33875 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: JAMES L. WEED, JR.

04/15/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: SD () Delete
Name: WEED, CAROL E MRS
Address: 5341 LIME ROAD
City-St-Zip: SEBRING, FL 33875

Title: P () Delete
Name: PENZIEN, CLAYTON MR
Address: 2105 FIESTA WAY
City-St-Zip: SEBRING, FL 33872

Title: D () Delete
Name: LINTON, JILL
Address: 121 LONGVIEW ROAD
City-St-Zip: SEBRING, FL 33870

Title: TD () Delete
Name: HOYT, CAROLE MRS
Address: 1026 N.W. LAKEVIEW DRIVE
City-St-Zip: SEBRING, FL 33870

Title: D () Delete
Name: WEED, JR, JAMES L REV.
Address: 5341 LIME ROAD
City-St-Zip: SEBRING, FL 33875

Title: VP () Delete
Name: RUMPF, RICHARD MR.
Address: 463 SUNRISE BLVD.
City-St-Zip: SEBRING, FL 33872

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: TD (X) Change () Addition
Name: WEED, CAROL E MRS
Address: 5341 LIME ROAD
City-St-Zip: SEBRING, FL 33875

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: SD (X) Change () Addition
Name: HOYT, CAROLE MRS
Address: 1026 N.W. LAKEVIEW DRIVE
City-St-Zip: SEBRING, FL 33870

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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: JAMES L. WEED, JR.

REV.

04/15/2009

Electronic Signature of Signing Officer or Director

Date