2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 20, 2006
Secretary of State

DOCUMENT# N95000003469

Entity Name: THE GOOD SHEPHERD UNITED METHODIST CHURCH OF LAKELAND, INC.

Current Principal Place of Business:

2815 N GALLOWAY ROAD
LAKELAND, FL 33809

New Principal Place of Business:

2815 N GALLOWAY ROAD
LAKELAND, FL 33810

Current Mailing Address:

2815 N GALLOWAY ROAD
LAKELAND, FL 33809

New Mailing Address:

2815 N GALLOWAY ROAD
LAKELAND, FL 33810

FEI Number: 59-2979664 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

MCNEIL, MARVAN
5053 SWINDELL RD
LAKELAND, FL 33810 US

Name and Address of New Registered Agent:

MCNEIL, MARVIN
5053 SWINDELL RD
LAKELAND, FL 33810 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: MARVIN MCNEIL 02/20/2006
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: MCNEIL, MARVIN
Address: 5053 SWINDELL RD
City-St-Zip: LAKELAND, FL 33810

Title: D ( ) Delete
Name: RHONEMUS, RUTH
Address: 219 JAY AVE
City-St-Zip: LAKELAND, FL 33801

Title: D ( ) Delete
Name: SOLIS, FELIX
Address: 3520 TIMBERLAKE RD N
City-St-Zip: LAKELAND, FL 33810

Title: T ( ) Delete
Name: KRAUSE, PATRICIA A
Address: 1735 QUAIL RUN
City-St-Zip: LAKELAND, FL 33810

Title: D ( ) Delete
Name: KELLER, TODD
Address: 6812 GLEN MEADOWS DR
City-St-Zip: LAKELAND, FL 33810

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: D (X) Change ( ) Addition
Name: RHONEMUS, RUTH
Address: 219 JAY AVE
City-St-Zip: LAKELAND, FL 33815

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

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

Title: D (X) Change ( ) Addition
Name: SPRESSER, CLESTON
Address: 403 MINNEHAHA TRAIL
City-St-Zip: LAKELAND, FL 33803

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: PATRICIA A. KRAUSE T 02/20/2006
Electronic Signature of Signing Officer or Director Date