

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000003469

FILED  
Jan 29, 2011  
Secretary of State

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

**Current Principal Place of Business:**

2815 N GALLOWAY ROAD  
LAKELAND, FL 33810

**New Principal Place of Business:**

**Current Mailing Address:**

2815 N GALLOWAY ROAD  
LAKELAND, FL 33810

**New Mailing Address:**

**FEI Number:** 59-2979664

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

MCNEIL, MARVIN  
5020 SHADYGLEN DR  
LAKELAND, FL 33810 US

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

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: P  
Name: MCNEIL, MARVIN  
Address: 5020 SHADYGLEN  
City-St-Zip: LAKELAND, FL 33810

Title: D  
Name: GREEN, LINDA  
Address: 120 BOYD ST  
City-St-Zip: LAKELAND, FL 33815

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

Title: D  
Name: MCVAY, LAURENCE  
Address: 40 KELLY DR  
City-St-Zip: LAKELAND, FL 33805

Title: D  
Name: GREEN, IRA  
Address: 120 BOYD ST  
City-St-Zip: LAKELAND, FL 33815

Title: D  
Name: WORTHINGTON, LEROY  
Address: 29 STEPHENS AVE  
City-St-Zip: LAKELAND, FL 33815

I hereby 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 all other like empowered.

SIGNATURE: PATRICIA A. KRAUSE

T

01/29/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date