

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000005046

FILED  
Apr 20, 2008  
Secretary of State

**Entity Name:** THE GOOD SHEPHERD TABERNACLES INC. INTERNATIONAL

**Current Principal Place of Business:**

504 NW DIXIE STREET  
LAKE CITY, FL 32055

**New Principal Place of Business:**

**Current Mailing Address:**

436 SW DONOVAN GLEN  
LAKE CITY, FL 32024

**New Mailing Address:**

**FEI Number:** 59-3525720

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

COPELAND, WILLIE  
436 SW DONOVAN GLEN  
LAKE CITY, FL 32024 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 ( ) Delete  
Name: COPELAND, WILLIE L  
Address: 436 SW DONOVAN GLEN  
City-St-Zip: LAKE CITY, FL 32024

Title: T ( ) Delete  
Name: ROLLINS, ROBERTA  
Address: 159 NW SILES GLEN  
City-St-Zip: LAKE CITY, FL 32055

Title: S ( ) Delete  
Name: JACKSON, EDITHIA  
Address: 436 SW DONOVAN GLEN  
City-St-Zip: LAKE CITY, FL 32024

Title: V ( ) Delete  
Name: COPELAND, EDITH  
Address: 436 SW DONOVAN GLEN  
City-St-Zip: LAKE CITY, FL 32024

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

Title: T (X) Change ( ) Addition  
Name: STEWART, FELECIA  
Address: 129 N.W. LEE LANE  
City-St-Zip: LAKE CITY, FL 32055

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: WILLIE COPELAND

P

04/20/2008

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

\_\_\_\_\_  
Date