

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000006988

FILED
Apr 16, 2009
Secretary of State

Entity Name: GOOD SHEPHERD AMERICAN CATHOLIC CHURCH, INC.

Current Principal Place of Business:

15045 AUBREY AVE
SPRING HILL, FL 34610 US

New Principal Place of Business:

Current Mailing Address:

15045 AUBREY AVE
SPRING HILL, FL 34610 US

New Mailing Address:

FEI Number: 59-3546840

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BRACCO, PHYLLIS A
15045 AUBREY AVE
SPRING HILL, FL 34610 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: PSD () Delete
Name: BRACCO, PHYLLIS ANN
Address: 15045 AUBREY AVE
City-St-Zip: SPRING HILL, FL 34610

Title: VTD () Delete
Name: BRACCO, ROBERT A
Address: 15045 AUBREY AVE
City-St-Zip: SPRING HILL, FL 34610

Title: D () Delete
Name: DENNISON, LINDA
Address: 203 CANDLEWICK AVENUE
City-St-Zip: SPRING HILL, FL 34608

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PTD (X) Change () Addition
Name: BRACCO, PHYLLIS ANN
Address: 15045 AUBREY AVE
City-St-Zip: SPRING HILL, FL 34610

Title: VD (X) Change () Addition
Name: MARENGHI, MICHAEL A
Address: 15045 AUBREY AVE
City-St-Zip: SPRING HILL, FL 34610

Title: SD (X) Change () Addition
Name: DENNISON, LINDA
Address: 15045 AUBREY AVE
City-St-Zip: SPRING HILL, FL 34610

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: PHYLLIS ANN BRACCO

PTD

04/16/2009

Electronic Signature of Signing Officer or Director

Date