

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000001448

FILED
Jan 22, 2012
Secretary of State

Entity Name: MINISTRY OF THE GOOD SHEPHERD, INC.

Current Principal Place of Business:

224 NE 3RD ST.
BOCA RATON, FL 33432

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 837
BOCA RATON, FL 33429

New Mailing Address:

FEI Number: 65-0877749

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

O'SULLIVAN, MARJORIE MRS.
224 NE 3RD ST.
BOCA RATON, FL 33432 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: PRES
Name: FICKEL, JERRY B MR.
Address: 11530 SW 83RD TERR.
City-St-Zip: MIAMI, FL 33173 US

Title: VP
Name: MANCERI, ISABEL C MRS.
Address: 2355 NW 43 STREET
City-St-Zip: BOCA RATON, FL 33431 US

Title: SECR
Name: JANELLEN, CARIGNAN MRS.
Address: 401 NE MIZNER BLVD. APT. T-501
City-St-Zip: BOCA RATON, FL 33432 US

Title: TREA
Name: FICKEL, BERTRAM D MR.
Address: 11530 SW 83 TERRACE
City-St-Zip: MIAMI, FL 33173 US

Title: DIR
Name: MARJORIE, O'SULLIVAN MRS.
Address: 224 NE 3RD ST.
City-St-Zip: BOCA RATON, FL 33432 US

Title: DIR
Name: WILLIAM, COMISKEY MR.
Address: 495 HOLLEY AVE.
City-St-Zip: LABELLE, FL 33935 US

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: MARJORIE O'SULLIVAN

SEC

01/22/2012

Electronic Signature of Signing Officer or Director

Date