

**2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 737843

**FILED**  
**Apr 08, 2019**  
**Secretary of State**  
**0734288694CC**

**Entity Name:** THE EVANGELICAL LUTHERAN CHURCH OF THE GOOD SHEPHERD

**Current Principal Place of Business:**

10891 102ND AVENUE N  
SEMINOLE, FL 33778

**Current Mailing Address:**

10891 102ND AVE NO  
SEMINOLE, FL 33778 US

**FEI Number: 59-1087048**

**Certificate of Status Desired: No**

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

KRICK, SHARON E  
911 CHESTNUT ST  
CLEARWATER, FL 33756 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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Officer/Director Detail :**

Title VP  
Name MEYER, BRET  
Address 13452 99TH AVE.  
City-State-Zip: SEMINOLE FL 33776

Title T  
Name SMITH, RAYMOND  
Address 19651 GULF BLVD.  
UNIT 11-A  
City-State-Zip: INDIAN SHORES FL 33785

Title P  
Name MONFRE, MARTIN  
Address 1545 BONAIR ST.  
City-State-Zip: CLEARWATER FL 33755

Title SECRETARY  
Name NASH, ABBI  
Address 1545 BONAIR ST.  
City-State-Zip: CLEARWATER FL 33755

*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: RAYMOND SMITH**

**TREASURER**

**04/08/2019**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date