Title	ASST. SEC/CLERK	Title	TREASURER
Name	CARTER, LISA	Name	CARTER, STEVEN BURROUGHS
Address	409 RUBY LAKE PL	Address	409 RUBY LAKE PLACE
City-State-Zip:	WINTER HAVEN FL 33884	City-State-Zip:	WINTER HAVEN FL 33884
Title	JR WARDEN	Title	CLERK
Name	FRANCK, BABETT	Name	WARNCKE, ROBERT
Address	3652 HURLBUT CR.	Address	200 FOURTH ST. S. #2
City-State-Zip:	LAKE WALES FL 33853	City-State-Zip:	#2 LAKE WALES FL 33853
Title	SR. WARDEN		
Name	ABBITT, JAMES		
Address	2250 N. SCENIC HWY		

Electronic Signature of Registered Agent

NUNEZ, TIMOTHY C 221 SOUTH FOURTH ST.

**Officer/Director Detail :** 

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.

#### 221 SOUTH FOURTH ST. LAKE WALES, FL 33853

**Current Principal Place of Business:** 

## FEI Number: 59-0766969

DOCUMENT# N0000003215

LAKE WALES, FLORIDA, INC.

221 SOUTH FOURTH ST. LAKE WALES, FL 33853

**Current Mailing Address:** 

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

SIGNATURE: TIMOTHY C. NUNEZ

LAKE WALES, FL 33853 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: LISA M CARTER

City-State-Zip: BABSON PARK FL 33827

02/09/2024 PARISH ADMINISTRATOR

Electronic Signature of Signing Officer/Director Detail

# 2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

Entity Name: THE EPISCOPAL CHURCH OF THE GOOD SHEPHERD OF

Date

#### FILED Feb 09, 2024 Secretary of State 4162051324CC

02/09/2024

Date

Certificate of Status Desired: No