

2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00295

Entity Name: GOOD SHEPHERD LUTHERAN CHURCH OF CHIEFLAND, INC.

Current Principal Place of Business:

14303 NW HWY 19
CHIEFLAND, FL 32626

Current Mailing Address:

P.O. BOX 2090
CHIEFLAND, FL 32644

FEI Number: 59-2344760

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

ROBINSON, CECIL
6100 NW 50TH STREET
BELL, FL 32619 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 PD
Name BEEGLE, EARL
Address 11390 NW 86TH COURT
City-State-Zip: CHIEFLAND FL 32626

Title T
Name ROBINSON, BETH
Address 6100 NW 50TH ST
City-State-Zip: BELL FL 32619

Title FS
Name MOLITOR, JUDY
Address P.O. BOX 444
City-State-Zip: CEDAR KEY FL 32625

Title VD
Name DADSWELL, DAVID
Address 11384 NW 113TH ST.
City-State-Zip: CHIEFLAND FL 32626

Title S
Name REAVES, MARTHA
Address 14251 NW 66 AVE.
City-State-Zip: CHIEFLAND FL 32626

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: BETH ROBINSON

TREASURER

04/22/2013

Electronic Signature of Signing Officer/Director Detail

Date