

**2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N14000006516

**Entity Name:** THE GOOD SHEPHERD LIFE CHANGING OUTREACH, INC.

**Current Principal Place of Business:**

294 POST PLANT ROAD  
QUINCY, FL 32352

**Current Mailing Address:**

294 POST PLANT ROAD  
QUINCY, FL 32352

**FEI Number: 47-1396851**

**Certificate of Status Desired: No**

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

HUTLEY-FIGGERS, LATISHA  
294 POST PLANT ROAD  
QUINCY, FL 32352 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 D  
Name FIGGERS, LATISHA  
Address 716 POINT MILLGIAN ROAD  
City-State-Zip: QUINCY FL 32352

Title D  
Name BARKLEY, NATACHA  
Address 181 FRANK JACKSON ROAD  
City-State-Zip: QUINCY FL 32351

Title D  
Name BRADLEY, KATHY  
Address 1280 MT. HOSEA CHURCH ROAD  
City-State-Zip: QUINCY FL 32352

Title D  
Name JACKSON, TAMESHIA  
Address 2425 MISSION ROAD #602  
City-State-Zip: TALLAHASSEE FL 32304

Title D  
Name GORNTA, NANCY  
Address 294 POST PLANT ROAD  
City-State-Zip: QUINCY FL 32352

Title D  
Name PEOPLES, TWYLA  
Address 146 PEOPLE ROAD  
City-State-Zip: QUINCY FL 32352

*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: NANCY C GORNTA**

**TREASURER**

**03/02/2015**

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

\_\_\_\_\_  
Date