2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N45750

Entity Name: SHEPHERD'S VILLAGE, INC.

Current Principal Place of Business:

1910 EAST BAY DRIVE LARGO, FL 33771

Current Mailing Address:

1910 EAST BAY DRIVE LARGO. FL 33771

FEI Number: 59-3096209 Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

PITCHON, SOL 467 BRIDLE PATH WAY TARPON SPRINGS, FL 34688 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

FILED Apr 24, 2013

Secretary of State

CC3820842917

Officer/Director Detail :

Title Title DC

PITCHON, SOL PILKINGTON, DAVID Name Name 467 BRIDLE PATH WAY Address Address 7295 SAVOY COURT City-State-Zip: SEMINOLE FL 33776 TARPON SPRINGS FL 34688 City-State-Zip:

Title DT Title DV

Name STUART, RODERICK Name KING, MILTON

Address 1539 RIDGEWOOD STREET Address 9813 TREE TOPS LAKE ROAD CLEARWATER FL 33755 City-State-Zip: City-State-Zip: TAMPA FL 33626

Title Title DS

Name CHAPMAN, TOM Name HUTH, MICHAEL Address 7675 HUNTER LANE

15305 WIND WHISPER DRIVE Address

City-State-Zip: PINELLAS PARK FL 33782 City-State-Zip: ODESSA FL 33556

Title DIRECTOR Title DIRECTOR

Name ARRINGTON, KATHY KONRAD, WILLIAM Name 2239 NW 82ND TERRACE Address 3614 TOWN AVE Address

City-State-Zip: BELL FL 32619 NEW PORT RICHEY FL 34655 City-State-Zip:

Continues on page 2

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.

04/24/2013 SIGNATURE: SOL PITCHON **PRESIDENT**

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued:

Title DIRECTOR

Name SHIELDS, STEPHEN DR.

Address 1211 REYNOLDS AVE SUITE B

City-State-Zip: CLEARWATER FL 33756