

**2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 648998

**Entity Name:** SHEPHARD'S BEACH RESORT, INC.

**Current Principal Place of Business:**

619 SOUTH GULFVIEW BOULEVARD  
CLEARWATER BEACH, FL 33767

**Current Mailing Address:**

619 SOUTH GULFVIEW BOULEVARD  
CLEARWATER BEACH, FL 33767 US

**FEI Number:** 59-1950743

**Certificate of Status Desired:** Yes

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

CLINE, HARRY SESQ.  
625 COURT ST., #625  
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 PD  
Name SHEPHARD, GERALDINE M  
Address 204 DRIFTWOOD LANE  
City-State-Zip: LARGO FL 33770

Title ST  
Name SHEPHARD, WILLIAM M JR.  
Address 205 DRIFTWOOD LANE  
City-State-Zip: LARGO FL 33770

*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 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** GERALDINE M. SHEPHARD

**PRESIDENT**

**02/25/2014**

Electronic Signature of Signing Officer/Director Detail

Date