2000 UNIFORM BUSINESS REPORT (UBR)

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

FILED Apr 17, 2000 8:00 am Secretary of State DOCUMENT # 705253 1. Entity Name FIRST PRESBYTERIAN CHURCH OF FORT MYERS, FLORIDA 04-17-2000 90012 035 ****61.25 Principal Place of Business Mailing Address 2438 SECOND ST. 2438 SECOND ST. FORT MYERS FL 33901-3044 FORT MYERS FL 33901 OPROID 3. Mailing Address 2. Principal Place of Business Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. City & State City & State 4. FEI Number Applied For 59-0823943 Not Applicable Zip Country \$8.75 Additional Zip Country 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) TERRY, T. RANKIN, JR. 1245 HANTON AVE. FT. MYERS FL 33901 City Zip Code 8. 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 (NOTE. Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title it applicable. .9. Election Campaign Financing Make Check Payable to FILE NOW: \$5.00 May Be Trust Fund Contribution. Added to Fees **Department of State** FEE IS \$61.25 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. OFFICERS AND DIRECTORS 11. **TP** TITLE ☐ Change ☐ Addition TITLE Delete President NAME DORSETT, HERB NAME Al Buralli STREET ADDRESS STREET ADDRESS 1370 TWIN PALM DR 1912 Madera Way , N. Fort Myers, FL 33903 CITY-ST-ZIP CITY-ST-ZIP FORT MYERS FL 33919 Vice-President ☐ Addition Delete TITLE ☐ Change TITLE TVP Richard Chappelle NAME NAME BLOOD, HAROLD STREET ADDRESS STREET ADDRESS 2212 SW 28th Terrace 15400 RIVER VISTA DR CITY-ST-ZIP CITY-ST-ZIP Cape Coral, FL 33914 FT. MYERS FL 33917 ☐ Change ■ Addition ☐ Delete TITLE ST TITLE Secretary NAME NAME SEGEL, BARB Bob Parkhurst STREET ADDRESS STREET ADDRESS 2049 MARAVILLA CIR 31.2 San Remo Lane CITY-ST-ZIP CITY-ST-ZIP FT MYERS FL 33901 N. Fort Myers, FL 33903 ☐ Change Addition ST Delete TITLE TITLE Treasurer NAME NAME PELTON, SHERMAN Mary Lee Mann STREET ADDRESS STREET ADDRESS 17734 ACAIA DR 17281 Brenfield Lane CITY-ST-ZIP CITY-ST-ZIP N FT MYERS FL 33917 Alva, FL 33920 TITLE ☐ Change ☐ Addition ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 12. I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.