

2009 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED
Nov 06, 2009
Secretary of State**

DOCUMENT# 711578

Entity Name: ST. LUKE'S EPISCOPAL CHURCH OF FORT MYERS, INC.**Current Principal Place of Business:**2635 CLEVELAND AVE
FORT MYERS, FL 33901**New Principal Place of Business:****Current Mailing Address:**2635 CLEVELAND AVE
FORT MYERS, FL 33901**New Mailing Address:****FEI Number:** 59-0774200**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**READ, FR. PHILIP D II
2635 CLEVELAND AVE.
FT MYERS, FL 33901 US**Name and Address of New Registered Agent:**

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

OFFICERS AND DIRECTORS:**Title:** D () Delete
Name: OAKES-LOTTERIDGE, ANDREW
Address: 1315 FLORIDA AVE
City-St-Zip: FORT MYERS, FL 33901**Title:** T () Delete
Name: HELMS, RICHARD
Address: 5865 TALLOWOOD COURT
City-St-Zip: FORT MYERS, FL 33919**Title:** VCD () Delete
Name: CRAVEN, HOWARD
Address: 3503 4TH ST. SW
City-St-Zip: LEHIGH ACRES, FL 33976**Title:** D () Delete
Name: YTTBERG, ROGER
Address: 7119 LAKERIDGE VIEW COURT 201
City-St-Zip: FORT MYERS, FL 33907**Title:** VCD () Delete
Name: CARROLL, MICHAEL
Address: 2312 WOODLAND TERRACE
City-St-Zip: FORT MYERS, FL 33907**Title:** D () Delete
Name: FURMAN, ROBERT
Address: 8624 WEST PARK
City-St-Zip: FORT MYERS, FL 33907**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:****Title:** CD (X) Change () Addition
Name: SMITH, WILLIAM R
Address: 2031 VALPARASIO BLVD
City-St-Zip: NORTH FORT MYERS, FL 33917**Title:** D (X) Change () Addition
Name: PASKIET, BEVERLY
Address: 13252 WHITEMARSH LANE #33
City-St-Zip: FORT MYERS, FL 33912**Title:** D (X) Change () Addition
Name: CRAVEN, HOWARD
Address: 3503 4TH ST. SW
City-St-Zip: LEHIGH ACRES, FL 33976**Title:** () Change () Addition
Name:
Address:
City-St-Zip:**Title:** () Change () Addition
Name:
Address:
City-St-Zip:**Title:** () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: FR. PHILIP D. READ, II

RECT

11/06/2009

Electronic Signature of Signing Officer or Director

Date