

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 713833

FILED
Apr 07, 2009
Secretary of State

Entity Name: COVENANT PRESBYTERIAN CHURCH OF FORT MYERS, FLORIDA INC.

Current Principal Place of Business:

2439 MCGREGOR BOULEVARD
FORT MYERS, FL 33901

New Principal Place of Business:

Current Mailing Address:

2439 MCGREGOR BOULEVARD
FORT MYERS, FL 33901

New Mailing Address:

FEI Number: 59-1150677

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WOLFF, FRED
3992 SABEL SPRINGS BLVD
NORTH FORT MYERS, FL 33917 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: TD () Delete
Name: SMITH, NANETTE
Address: 2350 W FIRST ST #206
City-St-Zip: FORT MYERS, FL 33901

Title: TD () Delete
Name: SCHORLE, JEFFREY
Address: 8001 ALAMANDA CT
City-St-Zip: LEHIGH ACRES, FL 33936

Title: TD () Delete
Name: WOLFF, FRED
Address: 3992 SABAL SPRINGS BLVD.
City-St-Zip: NORTH FORT MYERS, FL 33917

Title: AD () Delete
Name: METZGER, BARRY
Address: 1697 MCGREGOR RESER. DR
City-St-Zip: FORT MYERS, FL 33901

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: TD (X) Change () Addition
Name: WARREN, MEAD
Address: 16970-3 SAN CARLOS BLVD #246
City-St-Zip: FORT MYERS, FL 33908

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: BARRY METZGER

AD

04/07/2009

Electronic Signature of Signing Officer or Director

Date