

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED

Apr 19, 2004 8:00 am
Secretary of State

04-19-2004 90308 039 ****70.00

DOCUMENT # 722683

1. Entity Name
WINKLER ROAD BAPTIST CHURCH, INC.



Principal Place of Business
5770 WINKLER ROAD
FT MYERS, FL 33919

Mailing Address
5770 WINKLER ROAD
FT MYERS, FL 33919

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

02262004

Chg-NP

CR2E037 (10/03)

4. FEI Number
59-1817886

Applied For

Not Applicable

5. Certificate of Status Desired



\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

HUNTE, DAVID F.
307 SOUTH ROAD
FT. MYERS, FL 33907

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

Filing Fee is \$61.25
Due by May 1, 2004

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make check payable to
Florida Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE NAME
COREY, ARTHUR ☐ Delete
STREET ADDRESS
8341 BEACON BLVD.
CITY-ST-ZIP
FT. MYERS, FL

TITLE NAME
D WILLIAM MOORE ☐ Change ☒ Addition
STREET ADDRESS
1019 SUMICA DR.
CITY-ST-ZIP
FORT MYERS, FL 33919

TITLE NAME
TR MCDONALD, CHARLES ☐ Delete
STREET ADDRESS
2165 ELKTON COURT
CITY-ST-ZIP
FT. MYERS, FL 33907

TITLE NAME
D RANDALL HENDERSON ☐ Change ☒ Addition
STREET ADDRESS
4445 CROSSJACK CT. - APT. 82
CITY-ST-ZIP
FORT MYERS, FL 33919

TITLE NAME
D DOERSTLING, AXEL ☐ Delete
STREET ADDRESS
9131 SOUTHMONT COVE #306
CITY-ST-ZIP
FORT MYERS, FL 33908

TITLE NAME
D JAMES HOULIHAN ☐ Change ☒ Addition
STREET ADDRESS
18205 DUPONT DR.
CITY-ST-ZIP
FORT MYERS, FL 33912

TITLE NAME
D SANCHEZ, ANIBAL ☐ Delete
STREET ADDRESS
2173 ELKTON COURT
CITY-ST-ZIP
FT. MYERS, FL

TITLE NAME
D LAWRENCE LOUGHNER ☐ Change ☒ Addition
STREET ADDRESS
17040 EAST LAKE DR.
CITY-ST-ZIP
N. FORT MYERS, FL 33917

TITLE NAME
D PAPOTTO, ANGELO ☒ Delete
STREET ADDRESS
412 MERCURY WAY
CITY-ST-ZIP
FORT MYERS, FL

TITLE NAME
D TERRY SODREL ☐ Change ☒ Addition
STREET ADDRESS
11250 CARAVEL CR. #204
CITY-ST-ZIP
FORT MYERS, FL 33908

TITLE NAME
D NUNERY, RICHARD ☐ Delete
STREET ADDRESS
4325 PALM TREE BLVD.
CITY-ST-ZIP
CAPE CORAL, FL 33904

TITLE NAME
D BEN CRUMP ☐ Change ☒ Addition
STREET ADDRESS
6626 PLANTATION PINES
CITY-ST-ZIP
FORT MYERS, FL 33912

12. I hereby certify that the information supplied with this filing 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.

SIGNATURE:

Arthur R. Corey
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

ARTHUR R. COREY 4/12/04 239-482-7702

Date

Daytime Phone #