2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 02, 2005
Secretary of State

DOCUMENT# 735549

Entity Name: THE FIRST CHRISTIAN CHURCH OF FORT MYERS, FLORIDA, INC.

Current Principal Place of Business:

2061 MCGREGOR BLVD
FORT MYERS, FL 33901

New Principal Place of Business:

Current Mailing Address:

2061 MCGREGOR BLVD
FORT MYERS, FL 33901

New Mailing Address:

FEI Number: 59-0806972 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

COX, GARY E
2061 MCGREGOR BLVD.
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: COX, GARY E
Address: 1729 SAINT CLAIR AVENUE E
City-St-Zip: N. FT. MYERS, FL 33903 US

Title: VC/D ( ) Delete
Name: ROMEIS, GORDON
Address: 1521 COCONUT DRIVE
City-St-Zip: FORT MYERS, FL 33901 US

Title: T ( ) Delete
Name: SHEARN, JOE
Address: 1818 SE 20TH STREET
City-St-Zip: CAPE CORAL, FL 33990 US

Title: C/D ( ) Delete
Name: LINDVAL, JOHN
Address: 3757 DELEON STREET
City-St-Zip: FORT MYERS, FL 33901 US

Title: S ( ) Delete
Name: LADWIG, RUSS
Address: 918 DEAN WAY
City-St-Zip: FORT MYERS, FL 33919

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: S (X) Change ( ) Addition
Name: ADAMS, RICHARD
Address: 2110 SE 14TH STREET
City-St-Zip: CAPE CORAL, FL 33990

I hereby certify that the information supplied with this filing does not qualify for the 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 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: GARY E COX D 02/02/2005

Electronic Signature of Signing Officer or Director Date