

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000000813

**FILED**  
**Apr 30, 2012**  
**Secretary of State**

**Entity Name:** CHRISTIAN HOME EDUCATORS OF SOUTHWEST FLORIDA, INC.

**Current Principal Place of Business:**

2655 N AIRPORT ROAD  
FORT MYERS, FL 33907 US

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 61845  
FORT MYERS, FL 339061845 US

**New Mailing Address:**

**FEI Number:** 65-1068374      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

BENSON, CAROL  
3116 RIVER GROVE CIRCLE  
FORT MYERS, FL 33905 US

**Name and Address of New Registered Agent:**

WISE, STEVE  
4884 RIVERSIDE DR  
ESTERO, FL 33928 US

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: STEVE WISE

04/30/2012

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PD  
Name: WISE, STEVE  
Address: 4884 RIVERSIDE DR  
City-St-Zip: ESTERO, FL 33928 US

Title: VD  
Name: CARVELL, ROB  
Address: 18210 RIVERWIND DR  
City-St-Zip: ALVA, FL 33920 US

Title: SD  
Name: ROSAUER, COLEENE  
Address: 4091 RIVER DR  
City-St-Zip: FORT MYERS, FL 33916

Title: TD  
Name: WHITEHURST, KATHY  
Address: 224 NE 23RD PLACE  
City-St-Zip: CAPE CORAL, FL 33909 US

I hereby 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 all other like empowered.

SIGNATURE: STEVE WISE

PRES

04/30/2012

Electronic Signature of Signing Officer or Director

Date