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Feb 24, 1999 8:00 am  
Secretary of State

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0059125

NONPROFIT  
CORPORATION  
ANNUAL REPORT  
**1999**



FLORIDA DEPARTMENT OF STATE  
**Katherine Harris**  
Secretary of State  
DIVISION OF CORPORATIONS

**DOCUMENT # N28563**

1. Corporation Name

**FAITH UNITED METHODIST CHURCH OF FORT MYERS, INC**

Principal Place of Business

% CONRAD, BRUCE  
15690 MCGREGOR BLVD  
FORT MYERS FL 33908  
US

Mailing Address

% CONRAD, BRUCE  
15690 MCGREGOR BLVD  
FORT MYERS FL 33908  
US



2. Principal Place of Business

21 15690 McGregor Blvd

Suite, Apt. #, etc.

22 Fort Myers, FL

City & State

23 33908 US

Zip

Country

2a. Mailing Address

26 Same

Suite, Apt. #, etc.

27 City & State

28 Zip

Country

3. Date Incorporated or Qualified

09/27/1988

4. FEI Number

65-0131989

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution ☐

**\$5.00** May Be  
Added to Fees

9. Name and Address of Current Registered Agent

CONRAD, BRUCE  
16295 DAVIS RD  
LOT 47  
FT MYERS FL 33908

10. Name and Address of New Registered Agent

81 Name

Cesky, Emil

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

16191 Baton Rouge Ct.

83

84 City

Fort Myers

FL

85 Zip Code

33908

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

*[Signature]*

(NOTE: Registered Agent signature required when reinstating)

1/8/99

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE  
NAME HAAS, ROBERT  
STREET ADDRESS 14860 CANAAN DR  
CITY-ST-ZIP FT MYERS FL 33908

TITLE ☐ DELETE  
NAME GRESSMAN, ELIZABETH  
STREET ADDRESS 15560 CATALPA COVE DR  
CITY-ST-ZIP FORT MAYERS FL 33908

TITLE ☐ DELETE  
NAME CESKY, EMIL  
STREET ADDRESS 16191 BATON ROUGE CT  
CITY-ST-ZIP FT MYERS FL 33908

TITLE ☐ DELETE  
NAME WASEM, RICHARD  
STREET ADDRESS 15043 TAMARIND CAY ST  
CITY-ST-ZIP FT MYERS FL 33908

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☒ Addition  
1.2 NAME Gressman, Harold  
1.3 STREET ADDRESS 120 Seahorse Lane  
1.4 CITY-ST-ZIP Fort Myers Beach, FL 33931

2.1 TITLE ☒ Change ☐ Addition  
2.2 NAME Gressman, Elizabeth  
2.3 STREET ADDRESS 15560 Catalpa Cove Dr.  
2.4 CITY-ST-ZIP Fort Myers, FL 33908

3.1 TITLE ☒ Change ☐ Addition  
3.2 NAME Cesky, Emil  
3.3 STREET ADDRESS 16191 Baton Rouge Ct.  
3.4 CITY-ST-ZIP Fort Myers, FL 33908

4.1 TITLE ☐ Change ☒ Addition  
4.2 NAME McKee, Wayne  
4.3 STREET ADDRESS 12911 Iona Rd.  
4.4 CITY-ST-ZIP Fort Myers, FL 33908

5.1 TITLE ☐ Change ☒ Addition  
5.2 NAME Benner, Dan  
5.3 STREET ADDRESS 9780 Owlclaver  
5.4 CITY-ST-ZIP Fort Myers, FL 33919

6.1 TITLE ☐ Change ☒ Addition  
6.2 NAME Walker, Marty  
6.3 STREET ADDRESS 2121 Collier Ave. #201  
6.4 CITY-ST-ZIP Fort Myers, FL 33901

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *[Signature]*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

1/8/99

Daytime Phone #

454 6457

CR2E037 (11/98)