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**2003 NOT-FOR-PROFIT CORPORATION  
UNIFORM BUSINESS REPORT (UBR)**

<b>DOCUMENT # N28563</b>			
1. Entity Name <b>FAITH UNITED METHODIST CHURCH OF FORT MYERS, INC.</b>			
Principal Place of Business C/O HAROLD GRESSMAN William Davis 15690 MCGREGOR BLVD FORT MYERS, FL 33908 US		Mailing Address C/O HAROLD GRESSMAN William Davis 15690 MCGREGOR BLVD FORT MYERS, FL 33908 US	
2. Principal Place of Business		3. Mailing Address	
State, Apt. #, etc.		State, Apt. #, etc.	
City & State		City & State	
Zip		Zip	
Country		Country	
4. FEI Number <b>65-0131889</b>		Applied For Not Applicable	
5. Certificate of Status Desired <input checked="" type="checkbox"/> <b>\$8.75 Additional Fee Required</b>			
6. Name and Address of Current Registered Agent <b>DAVIS, WILLIAM P.O. BOX 80087 FORT MYERS, FL 33908</b> <i>15690 McGregor Blvd. Fort Myers, FL 33908</i>		7. Name and Address of New Registered Agent	
Name		Name	
Street Address (P.O. Box Number is Not Acceptable)		Street Address (P.O. Box Number is Not Acceptable)	
City		City	
FL		FL	
Zip Code		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 <i>William Davis</i>		DATE <i>3/20/03</i>	
Signature, typed or printed name of registered agent and title if applicable.		Date	
9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees			
10. OFFICERS AND DIRECTORS			
TITLE	NAME	STREET ADDRESS	CITY-STATE-ZIP
<input type="checkbox"/> Delete	D DEVENY, ROBERT	11240 BOARDWALK PL.	FT MYERS, FL 33908
<input type="checkbox"/> Delete	S CLAYTON, DAVIS	6770 WINKLER RD., APT Y-6	FORT MYERS, FL 33908
<input type="checkbox"/> Delete	P DAVIS, WILLIAM	P.O. BOX 80087	FORT MYERS, FL 33908
<input checked="" type="checkbox"/> Delete	D MESLER, KEN	12150 LIVE OAK DR	FORT MYERS, FL 33908
<input type="checkbox"/> Delete	D MOORE, DAVID	9317 PINEAPPLE	FORT MYERS, FL 33912
<input type="checkbox"/> Delete	D KLAREN, PHILIP	9825 OWL CLOVER	FORT MYERS, FL 33919
11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10			
<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	D Mary Kistler	13680 Knot	Fort Myers, FL 33908
<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	D Jay Ursoleo	9017 Ligon Ct.	Fort Myers, FL 33908
<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	D William Mankin	14870 Bonaire Cir.	Fort Myers, FL 33908
<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	D Regan Harris	1259 vesper Dr.	Fort Myers, FL 33901
<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	D Allan Boyes	16216 Lutar Dr.	Fort Myers, FL 33908
<input type="checkbox"/> Change <input type="checkbox"/> Addition			
12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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 the empowered.			
SIGNATURE: <i>William Davis</i>		DATE: <i>3/20/03</i>	
Signature and Title or Position of Agent, Officer or Director		Date	

CREC007 (10/02)