DOCUMENT # N39076

1. Entity Name

CHRISTIAN LIFE FELLOWSHIP OF LEE COUNTY, INC.

FILED
Jan 09, 2001 8:00 am
Secretary of State
01-09-2001 90016 031 ****70.00

Principal Place of Business	Mailing Address
1629 SE 47TH ST CAPE CORAL FL 33904 US	1629 SE 47 ST CAPE CORAL FL 33904 US

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

4. FEI Number 65-0238536 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☒ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

WRIGHT, DAVID E II
1629 SE 47TH ST
CAPE CORAL FL 33904

7. Name and Address of New Registered Agent

Name COMER, DAVID L.
Street Address (P.O. Box Number is Not Acceptable)
1629 S.E. 47TH ST.
City CAPE CORAL **FL** Zip Code 33904

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.

SIGNATURE David Comer PASTOR - PRESIDENT 1-3-01
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW: FEE IS $61.25

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

Make Check Payable to Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DTS PADGHAM, ROBERT 2827 SE 16TH PL CAPE CORAL FL 33904	☑ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D EVANGELISTA, NICK 422 SW 20TH ST CAPE CORAL FL 33991	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD WRIGHT, DAVID 1625 SW 32ND ST CAPE CORAL FL 33914	☑ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D TAYLOR, JOE 1839 SE 2ND TERR CAPE CORAL FL 33990	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SECRETARY / TREASURER / DIRECTOR JOE TAYLOR 1839 SE 2ND TERR. CAPE CORAL, FL. 33990	☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PRESIDENT/DIRECTOR DAVID COMER 1625 SW 32 ND ST CAPE CORAL, FL. 33914	☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DIRECTOR DAN HONG 7021 HOWARD ROAD BOKEELIA, FL. 33922	☐ Change ☑ Addition

CR2E037 (10/00)

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: David Comer SIGNATURE REQUIRED DAVID COMER PRESIDENT 1-3-01 (941) 542-7710
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #