

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N41919

FILED
Feb 11, 2011
Secretary of State

Entity Name: ALL SOULS EPISCOPAL CHURCH, INC.

Current Principal Place of Business:

14640 N CLEVELAND AVE
NORTH FORT MYERS, FL 33903 US

New Principal Place of Business:

Current Mailing Address:

14640 N CLEVELAND AVE
NORTH FORT MYERS, FL 33903 US

New Mailing Address:

FEI Number: 65-0151247

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KELMEREIT, ALAN
4554 SPRINGVIEW CIRCLE
LABELLE, FL 33935 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
Name: SWIFT, RONALD
Address: 404 NE 9TH STREET
City-St-Zip: CAPE CORAL, FL 33909 US

Title: S
Name: WALKER, CAROL
Address: 6786 WOLF RUN LANE
City-St-Zip: N FT MYERS, FL 33917 US

Title: D
Name: SWIFT, PATRICE A
Address: 404 NE 9TH STREET
City-St-Zip: CAPE CORAL, FL 33909 US

Title: D
Name: JOY, JOAN E
Address: 10511 LAKE LOOP ROAD
City-St-Zip: N FT MYERS, FL 33903 US

Title: D
Name: KELMEREIT, ALAN REV
Address: 4554 SPRINGVIEW CIRCLE
City-St-Zip: LABELLE, FL 33935

Title: T
Name: KELLY, BARBARA M
Address: 5341 SW 9TH PLACE
City-St-Zip: CAPE CORAL, FL 33914

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: BARBARA M KELLY

TREA

02/11/2011

Electronic Signature of Signing Officer or Director

Date