

**2020 FLORIDA NOT FOR PROFIT CORPORATION AMENDED ANNUAL
REPORT**

DOCUMENT# 710740

Entity Name: ST. PHILIP CHRISTIAN METHODIST EPISCOPAL CHURCH, INC.

FILED
May 12, 2020
Secretary of State
6864420484CC

Current Principal Place of Business:

ST. PHILLIP CME CHURCH
1920 LILLIE ST
FT. MYERS, FL 33916

Current Mailing Address:

ST. PHILLIP CME CHURCH
1920 LILLIE ST
FT. MYERS, FL 33916 US

FEI Number: 60-7043665

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

ANDERSON, ALICIA PASTOR
1920 LILLIE ST
FT. MYERS, FL 33916 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: ALICIA ANDERSON

05/12/2020

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PASTOR
Name ANDERSON, ALICIA REV.
Address ST. PHILLIP CME CHURCH
1920 LILLIE ST
City-State-Zip: FT. MYERS FL 33916

Title TRUSTEE
Name SPEED, JAMES
Address 1920 LILLIE STREET
City-State-Zip: FORT MYERS FL 33916

Title STEWARD
Name LEONARD, BARBARA
Address 1920 LILLIE STREET
City-State-Zip: FORT MYERS FL 33916

Title SECRETARY
Name NEAL, ANITA M REV.
Address ST. PHILLIP CME CHURCH
1920 LILLIE ST
City-State-Zip: FT. MYERS FL 33916

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: ALICIA ANDERSON

PASTOR

05/12/2020

Electronic Signature of Signing Officer/Director Detail

Date