

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

DOCUMENT# 712473

**FILED**  
**Jun 25, 2020**  
**Secretary of State**  
**5334951335CC**

**Entity Name:** THE CHRISTIAN AND MISSIONARY ALLIANCE FOUNDATION, INC.

**Current Principal Place of Business:**

15000 SHELL POINT BLVD.  
STE 100  
FT. MYERS, FL 33908

**Current Mailing Address:**

15000 SHELL POINT BLVD.  
STE 100  
FT. MYERS, FL 33908

**FEI Number: 59-1166437**

**Certificate of Status Desired: No**

**Name and Address of Current Registered Agent:**

SCHAPPELL, MARTIN C  
15000 SHELL POINT BLVD  
STE 100  
FORT MYERS, FL 33908 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: MARTIN SCHAPPELL**

**06/25/2020**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title CHAIRMAN  
Name O'FARRELL, MARK T DR.  
Address 15000 SHELL POINT BLVD  
SUITE 100  
City-State-Zip: FORT MYERS FL 33908

Title VC  
Name DUSS, DONNA J  
Address 15000 SHELL POINT BLVD  
SUITE 100  
City-State-Zip: FORT MYERS FL 33908

Title S  
Name DEWITT, CHARLES B  
Address 15000 SHELL POINT BLVD  
SUITE 100  
City-State-Zip: FORT MYERS FL 33908

Title T  
Name DAVIDSON, JOHN W  
Address 15000 SHELL POINT BLVD  
SUITE 100  
City-State-Zip: FORT MYERS FL 33908

Title DIRECTOR  
Name ANDERSON, WANDA ESQ.  
Address 15000 SHELL POINT BLVD  
SUITE 100  
City-State-Zip: FORT MYERS FL 33908

Title DIRECTOR  
Name CASS, PAUL T DR.  
Address 15000 SHELL POINT BLVD  
SUITE 100  
City-State-Zip: FORT MYERS FL 33908

Title DIRECTOR  
Name CHRISTMAN, CHANLEY M  
Address 15000 SHELL POINT BLVD  
SUITE 100  
City-State-Zip: FORT MYERS FL 33908

Title DIRECTOR  
Name GLENN, JAMES D DR.  
Address 15000 SHELL POINT BLVD  
SUITE 100  
City-State-Zip: FORT MYERS FL 33908

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*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: MARTIN SCHAPPELL**

**PRESIDENT, ASST  
SECRETARY**

**06/25/2020**

**Officer/Director Detail Continued :**

Title DIRECTOR  
Name HIBBARD, JAY  
Address 15000 SHELL POINT BLVD  
SUITE 100  
City-State-Zip: FORT MYERS FL 33908

Title DIRECTOR  
Name SCOTT, ROBERT M  
Address 15000 SHELL POINT BLVD  
SUITE 100  
City-State-Zip: FORT MYERS FL 33908

Title DIRECTOR  
Name COOK, NANCY D  
Address 15000 SHELL POINT BLVD  
City-State-Zip: FORT MYERS FL 33908

Title CFO, ASST. TREASURER  
Name RAINEY, L BURKE  
Address 15000 SHELL POINT BLVD  
SUITE 100  
City-State-Zip: FORT MYERS FL 33908

Title DIRECTOR  
Name SCALES, MICHAEL G DR.  
Address 15000 SHELL POINT BLVD  
SUITE 100  
City-State-Zip: FORT MYERS FL 33908

Title DIRECTOR  
Name WHITE , ARCHIE L SR.  
Address 15000 SHELL POINT BLVD  
SUITE 100  
City-State-Zip: FORT MYERS FL 33908

Title PRESIDENT, ASST. SECRETARY  
Name SCHAPPELL, MARTIN  
Address 15000 SHELL POINT BLVD  
SUITE 100  
City-State-Zip: FORT MYERS FL 33908