#### **2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

**DOCUMENT# 727241** 

Entity Name: EVANGELICAL CHRISTIAN SCHOOL, INC.

FILED
Mar 21, 2013
Secretary of State
CC6069715263

### **Current Principal Place of Business:**

8237 BEACON BLVD FT. MYERS. FL 33907

## **Current Mailing Address:**

8237 BEACON BLVD FT. MYERS, FL 33907

FEI Number: 59-1484745 Certificate of Status Desired: No

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

HUNTE, JOHN 8237 BEACON BLVD. FORT MYERS, FL 33907 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:

Electronic Signature of Registered Agent

Date

#### Officer/Director Detail:

Title C Title D

NameLANPHER, BILL DR.NameKINCAID, RAY LMR.Address12207 OAKMONT COURTAddress11409 OAKMONT CT.City-State-Zip:FORT MYERS FL 33908City-State-Zip:FORT MYERS FL 33908

Title D Title D

Name MALAVSKY, JEFF MR. Name ESHBAUGH, BARBARA DR.

Address 14110 CEMETARY ROAD Address 3752 HAROLD AVE.

City-State-Zip: FORT MYERS FL 33905 City-State-Zip: FORT MYERS FL 33901

Title D Title D

NameJOHNS, BOBNameHOLBROOK, JAMES REV.Address3217 PELICAN BLVD.Address12250 COCONUT CREEK CTCity-State-Zip:CAPE CORAL FL 33914City-State-Zip:FORT MYERS FL 33908

Title DIRECTOR Title SECRETARY

Name BURDETTE, LYNNE Name SCHAPPELL, JANET

Address 15291 SAM SNEAD LANE Address 7383 HERITAGE PALMS ESTATES DR.

City-State-Zip: NORTH FORT MYERS FL 33917 City-State-Zip: FORT MYERS FL 33966

# Continues on page 2

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: BILL LANPHER CHARIMAN 03/21/2013

Electronic Signature of Signing Officer/Director Detail

Date

# Officer/Director Detail Continued:

Title DIRECTOR Name MILLER, BRAD

7130 HENDRY CREEK DRIVE Address City-State-Zip: FORT MYERS FL 33908