

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

DOCUMENT# N14000005058

**Entity Name:** FAITH & ALE - FORT MYERS, INC.

**Current Principal Place of Business:**

15161 CANONGATE DRIVE  
FT. MYERS, FL 33912

**Current Mailing Address:**

15161 CANONGATE DRIVE  
FT. MYERS, FL 33912 US

**FEI Number:** 47-1204806

**Certificate of Status Desired:** No

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

ESSEN, BRUCE M  
2449 FIRST STREET  
FORT MYERS, FL 33913 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 D  
Name ST. MARTIN, MARC  
Address 12220 TOWNE LAKE DR. #30  
City-State-Zip: FORT MYERS FL 33913

Title SD  
Name ESSEN, BRUCE M  
Address 2449 FIRST STREET  
City-State-Zip: FT. MYERS FL 33901

Title VP  
Name LANCELLOT, MICHAEL  
Address 15292 FIDDLESTICKS BLVD  
City-State-Zip: FT. MYERS FL 33912

Title DIRECTOR  
Name ORRICO, DON N  
Address 10025 VILLAGIO GARDENS LANE  
UNIT 203  
City-State-Zip: ESTERO FL 33928

Title DIRECTOR  
Name CALLANS, THOMAS  
Address 15161 CANONGATE DRIVE  
City-State-Zip: FORT MYERS FL 33912

Title DIRECTOR  
Name DWYER, JIM  
Address 15451 KILBIRNIE DRIVE  
City-State-Zip: FORT MYERS FL 33912

Title DIRECTOR  
Name FORD, ANGE  
Address 13810 LAKE MAHAGONY BLVD, #122  
City-State-Zip: FORT MYERS FL 33907

Title DIRECTOR  
Name MEYER, JOHN  
Address 6686 KESTREL CIRCLE  
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:** THOMAS CALLANS

03/26/2020

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date

**Officer/Director Detail Continued :**

Title DIRECTOR  
Name CRAWFORD, DAVID  
Address 19355 PINE GLEN DRIVE  
City-State-Zip: FORT MYERS FL 33967

Title DIRECTOR  
Name KOROM, JIM  
Address 12052 BRASSIE BEND #201  
City-State-Zip: FORT MYERS FL 33913

Title DIRECTOR  
Name MEYER, JC  
Address 9980 ROOKERY CIRCLE  
City-State-Zip: ESTERO FL 33928