

**2022 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N28563

**FILED**  
**Mar 23, 2022**  
**Secretary of State**  
**8366452950CC**

**Entity Name:** FAITH UNITED METHODIST CHURCH OF FORT MYERS, INC.

**Current Principal Place of Business:**

C/O MICHAEL W. JACKSON  
15690 MCGREGOR BLVD  
FORT MYERS, FL 33908

**Current Mailing Address:**

C/O MELISSA STOTT  
15690 MCGREGOR BLVD  
FORT MYERS, FL 33908 US

**FEI Number:** 65-0131989

**Certificate of Status Desired:** No

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

JACKSON, MICHAEL W MR.  
126 SW 22ND ST.  
CAPE CORAL, FL 33991 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:** MICHAEL W. JACKSON

03/23/2022

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title            PRESIDENT  
Name            JACKSON, MICHAEL W.  
Address        126 SW 22ND ST.  
City-State-Zip: CAPE CORAL FL 33991

Title            VP  
Name            PACHECO, MICHAEL  
Address        1106 SE 4TH AVE.  
City-State-Zip: CAPE CORAL FL 33990

Title            TREASURER  
Name            BOSMAN, JILL  
Address        2806 VIA PIAZZA LOOP  
City-State-Zip: FORT MYERS FL 33905

Title            SECRETARY  
Name            NELSON, SANDY  
Address        2734 BRIGHTSIDE COURT  
City-State-Zip: CAPE CORAL FL 33991

Title            DIRECTOR  
Name            ROECKER, LARRY  
Address        13641 KNOT DR.  
City-State-Zip: FORT MYERS FL 33908

Title            DIRECTOR  
Name            RILL, JOE  
Address        9611 LAS CASAS DR.  
City-State-Zip: FORT MYERS FL 33919

Title            DIRECTOR  
Name            AYERS, ANN  
Address        8953 CROWN BRIDGE WAY  
City-State-Zip: FORT MYERS FL 33908

Title            DIRECTOR  
Name            SMITH, MARTHA  
Address        880 DEEP LAGOON LN.  
City-State-Zip: FORT MYERS FL 33919-6019

**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:** MICHAEL JACKSON

PRESIDENT

03/23/2022

Electronic Signature of Signing Officer/Director Detail

Date

**Officer/Director Detail Continued :**

Title           DIRECTOR  
Name           KOERNER, GAIL  
Address        16048 WATERLEAF LANE  
City-State-Zip: FORT MYERS FL 33908-3163