

**2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N41919

**Entity Name:** ALL SOULS EPISCOPAL CHURCH, INC.

**Current Principal Place of Business:**

14640 N CLEVELAND AVE  
NORTH FORT MYERS, FL 33903

**Current Mailing Address:**

14640 N CLEVELAND AVE  
NORTH FORT MYERS, FL 33903 US

**FEI Number:** 65-0151247

**Certificate of Status Desired:** No

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

CLEARY, BRIAN THE REV  
2150 EMBARCADERO WAY  
NORTH FORT MYERS, FL 33917 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:** BRIAN CLEARY

02/10/2023

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title SENIOR WARDEN  
Name THOMPSON, CHARLES A  
Address P O BOX 151179  
City-State-Zip: CAPE CORAL FL 33915

Title CLERK OF THE VESTRY  
Name LYONS, NANCY  
Address 2200 RIO NUEVO DR  
City-State-Zip: N FT MYERS FL 33917

Title PRIEST  
Name CLEARY, BRIAN THE REV  
Address 2150 EMBARCADERO WAY  
City-State-Zip: NORTH FORT MYERS FL 33917

Title TREASURER  
Name JOHNSON, JIM  
Address 950 MOODY RD  
UNIT 119  
City-State-Zip: NORTH FORT MYERS FL 33903

Title JUNIOR WARDEN  
Name LAGASSE, ROGER  
Address 14504 CONCORD DR  
City-State-Zip: N FT MERS FL 33917

Title ASST. TREASURER  
Name MARTIN, CHERIE  
Address 5610 FOXLAKE DRIVE  
City-State-Zip: NORTH FORT MYERS FL 33917

*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:** CHARLES A THOMPSON

SENIOR WARDEN

02/10/2023

Electronic Signature of Signing Officer/Director Detail

Date