## 2022 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N48940

Entity Name: CHRIST UNITED METHODIST CHURCH OF LEHIGH ACRES,

INC.

**Current Principal Place of Business:** 

1430 HOMESTEAD RD. N. LEHIGH ACRES, FL 33936

**Current Mailing Address:** 

1430 HOMESTEAD RD. N. LEHIGH ACRES, FL 33936 US

FEI Number: 59-1318118 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

GOLDEN, CHARLENE L 1430 HOMESTEAD RD. N. LEHIGH ACRES, FL 33936 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: CHARLENE L. GOLDEN 01/31/2022

> Electronic Signature of Registered Agent Date

Officer/Director Detail:

Title **TRUSTEE** Title TRUSTEE, CHAIRMAN

Name HYMAN, BRUCE Name EASTON, TIM

Address 814 LAMAR ST E Address 1312 NE 22ND AVE

City-State-Zip: LEHIGH ACRES FL 33974-1715 City-State-Zip: CAPE CORAL FL 33909-1710

**TRUSTEE** Title **TRUSTEE** Title

BILLIARD, DEBBIE Name GUIDO, WILLIAM Name Address 4783 MIRAGE BAY CIR Address 29 LORELEI AVE

City-State-Zip: LEHIGH ACRES FL 33936 City-State-Zip: FORT MYERS FL 33966

Title **TRUSTEE** Title **TRUSTEE** 

Name STEWART, LEROY Name PEREZ, BARRY Address 708 HIBISCUS AVE 3315 19TH ST W Address

City-State-Zip: LEHIGH ACRES FL 33972 LEHIGH ACRES FL 33971 City-State-Zip:

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: TIMOTHY EASTON

01/31/2022 TRUSTEE CHAIRPERSON

Electronic Signature of Signing Officer/Director Detail

Date

**FILED** Jan 31, 2022

**Secretary of State** 

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