## 2015 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 01/27/2015

> Electronic Signature of Registered Agent Date

Officer/Director Detail:

Title **TRUSTEE** Title **TRUSTEE** Name THOMPSON, RICHARD Name LONG, PATTY

Address 319 INMAN AVE. Address 545 BETHANY VILLAGE CIRCLE

City-State-Zip: LEHIGH ACRES FL 33936 City-State-Zip: LEHIGH ACRES FL 33936

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

JACOBY, RON Name HOCKERT, LARRY Name

Address 706 E 5TH ST Address 11820 NEWCOMBE TRACE

City-State-Zip: FORT MYERS FL 33913-8421 City-State-Zip: LEHIGH ACRES FL 33972-4050

Title **CHAIRMAN TRUSTEE** Title TRUSTEE Name MACKENZIE, DON Name WILLIAMS, CHERYL

Address 1713 WILLIAMS AVE. 703 MILKWAUKEE BLVD Address

City-State-Zip: LEHIGH ACRES FL 33972 LEHIGH ACRES FL 33974-9571 City-State-Zip:

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

Name HART, SHARON CURRIE, ROY Name

Address 1152 CHEROKEE AVE Address 605 DESOTO AVE

City-State-Zip: LEHIGH ACRES FL 33936 LEHIGH ACRES FL 33972 City-State-Zip:

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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: DON MACKENZIE

Electronic Signature of Signing Officer/Director Detail

TRUSTEE CHAIRMAN

01/27/2015

**FILED** Jan 27, 2015

**Secretary of State** 

CC7329716340

Date

## Officer/Director Detail Continued:

Title TRUSTEE

Name WOLFSON, MARGARITA

Address 816 PALMETTO AVE

City-State-Zip: LEHIGH ACRES FL 33972-8119