

**2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N48940

**FILED**  
**Jan 24, 2018**  
**Secretary of State**  
**CC3093468328**

**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

01/24/2018

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title TRUSTEE  
Name HOCKERT, LARRY  
Address 706 E 5TH ST  
City-State-Zip: LEHIGH ACRES FL 33972-4050

Title TRUSTEE  
Name DARPINO, GARY  
Address 2412 HAWALASKA ST.  
City-State-Zip: LEHIGH ACRES FL 33973-6656

Title CHAIRMAN TRUSTEE  
Name MACKENZIE, DON  
Address 1713 WILLIAMS AVE.  
City-State-Zip: LEHIGH ACRES FL 33972

Title TRUSTEE  
Name STEWART, LEROY  
Address 708 HIBISCUS AVE  
City-State-Zip: LEHIGH ACRES FL 33972

Title TRUSTEE  
Name CURRIE, ROY  
Address 605 DESOTO AVE  
City-State-Zip: LEHIGH ACRES FL 33972-7934

Title TRUSTEE  
Name HYMAN, BRUCE  
Address 814 LAMAR ST E  
City-State-Zip: LEHIGH ACRES FL 33974-1715

Title TRUSTEE  
Name LONG, PATTY  
Address 545 BETHANY VILLAGE CIR  
City-State-Zip: LEHIGH ACRES FL 33936-7625

Title TRUSTEE  
Name BOYD, DONNA  
Address 1802 E 7TH ST  
City-State-Zip: LEHIGH ACRES FL 33972-4272

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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

TRUSTEE CHAIR

01/24/2018

Electronic Signature of Signing Officer/Director Detail

Date

**Officer/Director Detail Continued :**

Title TRUSTEES, VICE-CHAIRPERSON  
Name EASTON, TIM  
Address 1312 NE 22ND AVE  
City-State-Zip: CAPE CORAL FL 33909-1710