

# 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Jul 13, 2005 08:00 AM**  
**Secretary of State**

**DOCUMENT # 703081**

1. Entity Name  
**FORT MYERS CHRISTIAN CHURCH (DISCIPLES OF CHRIST) OF FORT MYERS FLORIDA, INC.**



Principal Place of Business  
**5916 WINKLER ROAD  
FORT MYERS, FL 33919 US**

Mailing Address  
**P.O. BOX 07097  
FORT MYERS, FL 33919 US**



07072005 No Chg-NP CR2E037 (10/03)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number  
**59-6553153** Applied For  
Not Applicable  
5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

**GEARHART, WILBUR  
9553 MARINERS COVE LANE  
FORT MYERS, FL 33919**

**DO NOT WRITE  
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE *Wilbur G. Gearhart*

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

*7-11-05*

DATE

**Filing Fee is \$61.25  
Due by September 7, 2005**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00 May Be  
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	D GEARHART, WILBUR 9553 MARINERS COVE LANE FORT MYERS, FL 33919
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VMD STRIVERS, JEFF 15072 CLOVERDALE FORT MYERS, FL 33919
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD BANNISTER, JEAN 4681-2 LAKESIDE CLUB BLVD. FORT MYERS, FL 33905
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD CAMPS, TOM 1039 BAYSHORE AVE. FORT MYERS, FL 33919
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T SKAGGS, HILDUR 16983 TIMBERLAKES DRIVE FORT MYERS, FL 33908
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T GAY, DELORES 1816 SE 6TH TERRACE CAPE CORAL, FL 33990

000000372503  
07/13/05-80003-013 61.25

**DO NOT WRITE  
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Wilbur G. Gearhart*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

*7-11-05 238-981-3815*  
Date Daytime Phone #