2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED Feb 20, 2008 8:00 am Secretary of State

DOCUMENT # 705253 1. Entity Name FIRST PRESBYTERIAN CHURCH OF FORT MYERS, FLORIDA, INC.							02-20-2008	90007 008	****61	25
Principal Plac 2438 SECON FORT MYERS				8 6181 81188 11686 81888 118	. 61811 61811 61811 611	EN GIGAL BIGA	18 F 189			
2. Principal Place of Business - No P.O. Box #			3. Mailing Address							
Suite, Apt. #, etc.		Suite, Apt. #, etc.			02112008	Chg-NP	CR2E037 (
City & State		City & State			4. FEI Numbe 59-0823			No	plied For Applicable	
Zip		Country	Zip	Country		<u> </u>	of Status Desired	Fee	.75 Addi Required	
	6. Name	and Address of Current	Registered Agent	Name		7. Name and	Address of New R	egistered Age	nt	·
TERRY, T 1245 HAN FT. MYER		ddress (I	P.O. Box Numbe	er is Not Acceptable	e)					
				City				FL	Zip Code	······································
	named entitions of regis		r the purpose of changing its re	egistered office o	r register	red agent, or bot	h, in the State of Flo	, .	iliar with, a	
SIGNATURE				;						
$A^*P_{\mathbf{k}}$	Signature, types	or printed name of registered agent	and title if applicable. (NOTE: F	Registered Agent signa	ture required	when reinstating)		ĐATE		
Asa CE DE		e is \$61.25 lay 1, 2008	9. Election Camp Trust Fund Co		· · · · · ·	\$5.00 May B		ake check pa ida Departme		
10.		<u> </u>								
	•	OFFICERS AND DIF	RECTORS	11.	-		ANGES TO OFFICE	RS AND DIREC	TORS IN	10
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NAME STREET ADDRESS CITY-ST-ZIP	HAMRIC, 1226 ALH FORT MY	LALAI .	☐ Delete	TITLE NAME			ANGES TO OFFICE		Change	Addition
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12. I nereby certify that the information supplied with this filling does not quality for the exemptions contained in Chapter 119, 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

411/2008

239-334-2261

Daytime Phone ●