FILED

2001 UNIFORM BUSINESS REPORT (UBR)

Jan 16, 2001 8:00 am Secretary of State **DOCUMENT # 707507** 1. Entity Name BAPTIST FOUNDATION OF FORT MYERS, FLORIDA, INC. 01-16-2001 90044 017 ****61.25 Mailing Address Principal Place of Business C/O JAMES T. HUMPHREY C/O JAMES T. HUMPHREY **UUUUUUUU** 1625 HENDRY STREET. SUITE 301 1625 HENDRY STREET, SUITE 301 FORT MYERS FL 33901 FORT MYERS FL 33901 3. Mailing Address 2. Principal Place of Business DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite Ant. #. etc. Applied For City & State 4. FEI Number City & State 59-1947687 Not Applicable \$8.75 Additional Zip Country Country Zip 5. Certificate of Status Desired Fee Required: 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) HUMPHREY, JAMES T 1625 HENDRY STREET, SUITE 301 FORT MYERS FL 33901 Zip Code City 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. SIGNATURE (NOTE: Registered Agent signature required when reinstating) DATE Signature, typed or printed name of registered agent and title if applicable. Make Check Payable to 9. Election Campaign Financing **\$5.00** May Be FILE NOW: **Department of State** Trust Fund Contribution. Added to Fees **FEE IS \$61.25** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 11. 10. ☐ Addition ☐ Change ☐ Delete TITLE D TITLE NAME NAME HOGAN, DILMUS D STREET ADDRESS STREET ADDRESS 5850 JEFFERY LN CITY-ST-ZIP CITY-ST-7IP FT MYERS FL 33907 ☐ Addition ☐ Change ☐ Delete TITLE TITLE D DECARLO, PAUL NAME STREET ADDRESS STREET ADDRESS 1307 ALCAZAR AVE CITY-ST-ZIP CITY-ST-ZIP FT MYERS FL 33901 ☐ Addition ☐ Change ☐ Delete TITLE TD TITLE NAME NAME NYCHYK, ANDY STREET ADDRESS STREET ADDRESS 2606 CORTEZ BLVD. CITY-ST-ZIP CITY-ST-ZIP FT. MYERS FL 33901 ☐ Change ☐ Addition ☐ Delete TITLE NAME MILLER, WAYNE NAME STREET ADDRESS STREET ADDRESS 1299 PLUMOSA DRIVE CITY-ST-ZIP CITY-ST-ZIP FT. MYERS FL 33901 Change Addition ☐ Delete TITLE TITLE HUMPHREY, JAMES T NAME NAME STREET ADDRESS STREET ADDRESS 1625 HENDRY STREET, SUITE 301 CITY-ST-ZIP CITY-ST-ZIP FORT MYERS FL 33901 Change ☐ Addition ☐ Delete TITLE VSD TITLE NAME NAME CORNWELL, NAT STREET ADDRESS STREET ADDRESS 1248 COCONUT DRIVE CITY-ST-ZIP CITY-ST-7IP FORT MYERS FL 33901 I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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: REJame's F. OHumphrey, President 1-9-01 941-334-2722