

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 18, 2008 08:00 A
Secretary of State

DOCUMENT # 707921

1. Entity Name
TEMPLE BAPTIST CHURCH OF LEE COUNTY, INC.



Principal Place of Business
**18841 STATE RD 31
N FT MYERS, FL 33917**

Mailing Address
**18841 STATE RD 31
N FT MYERS, FL 33917**



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

02252008

Chg-NP

CR2E037 (12/06)

City & State

City & State

4. FEI Number

59-1286106

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**GRIFFITH, KENNETH R
7770 DENI DRIVE
NORTH FORT MYERS, FL 33917**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$61.25
Due by May 1, 2008**

9. Election Campaign Financing
Trust Fund Contribution: ☐

\$5.00 May Be
Added to Fees

**Make check payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE **VD** ☐ Delete
NAME **TILLMAN, HENRY**
STREET ADDRESS **2205 CALADIUM RD**
CITY-ST-ZIP **FORT MYERS, FL 33905**

TITLE **PD** ☐ Delete
NAME **GRIFFITH, KENNETH R.**
STREET ADDRESS **7770 DENI DR**
CITY-ST-ZIP **NORTH FORT MYERS, FL 33917**

TITLE **SD** ☐ Delete
NAME **BUKOWSKI, ANNE L**
STREET ADDRESS **15054 HAWK SHADOW DR.**
CITY-ST-ZIP **FT. MYERS, FL 33905**

TITLE **TD** ☐ Delete
NAME **WITHROW, THOMAS E**
STREET ADDRESS **14037 ST. KITTS**
CITY-ST-ZIP **FORT MYERS, FL 33905**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify 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 the 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 SIGNED OFFICER OR DIRECTOR

Date

Daytime Phone #

MARCH 5, 2008

239-543-3222

Kenneth R. Griffith