

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 25, 2005 8:00 am
Secretary of State

04-25-2005 90319 037 ****61.25

DOCUMENT # 709259 1. Entity Name GULF COAST CHURCH OF CHRIST OF SOUTHWEST FLORIDA, INC.					
Principal Place of Business 3825 MCGREGOR BLVD FT MYERS, FL 33901			Mailing Address 3825 MCGREGOR BLVD FT MYERS, FL 33901		
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip		Country		Zip	
Country		Country		Country	
4. FEI Number 59-2167051				Applied For ☐ Not Applicable	
5. Certificate of Status Desired ☐				\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent THARPE, DAVID H 7212 SWAN LAKE DRIVE FORT MYERS, FL 33919			7. Name and Address of New Registered Agent 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: <u><i>David H. Tharpe</i></u> 4/21/05 Signature, typed or printed name of registered agent, and title if applicable. (NOTE: Registered Agent signature required when reinstating)					
Filing Fee is \$61.25 Due by May 1, 2005		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			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D OSBORNE, LARRY D 5061 SYCAMORE DRIVE NAPLES, FL 34119 ☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD Carter, Randall 9404 Springview Loop Estate, FL 33928 ☐ Change ☒ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD BETTS, GENE 7 BROADWAY CIR FT MYERS, FL ☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Battle, Ron 1409 SE 4th St. Cape Coral, FL 33990 ☐ Change ☒ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD LOVE, BILL 7591 WOODLAND BEND CIRCLE FT. MYERS, FL 33912 ☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Love, Bill 5121-303 W. Hyde Park Ct. Ft. Myers, FL 33912 ☒ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DC THARPE, DAVID H 7212 SWAN LAKE DRIVE FORT MYERS, FL 33919 ☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Tharpe, David H. 7212 Swan Lake Dr. Ft. Myers, FL 33919 ☒ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ATKINS, FREDERICK C 1349 SE 4TH STREET CAPE CORAL, FL 33990 ☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD Atkins, Frederick C. 1349 SE 4th St. Cape Coral, FL 33990 ☒ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MAXWELL, W. MICHAEL 832 N TOWN & RIVER DR FORT MYERS, FL 33919 ☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	CD Maxwell, W. Michael 832 N. Town & River Dr. Ft. Myers, FL 33919 ☒ Change ☐ Addition	
12. 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: <u><i>David H. Tharpe</i></u> 4/21/05 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #					