

2002 UNIFORM BUSINESS REPORT (UBR)**FILED****Apr 23, 2002 8:00 am**
Secretary of State

04-23-2002 90392 050 ****61.25

DOCUMENT # 727241

1. Entity Name

EVANGELICAL CHRISTIAN SCHOOL, INC.

Principal Place of Business

Mailing Address

**7 BEACON BLVD S.E.
MYERS FL 33907****8237 BEACON BLVD S.E.
FT. MYERS FL 33907**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-1484745

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

**DUNN, DOUGLAS
13553 PINE VILLA LANE
FT. MYERS FL 33908**

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.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.259. Election Campaign Financing
Trust Fund Contribution. ☐**\$5.00** May Be
Added to Fees**Make Check Payable to
Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☐ Delete
NAME PD
STREET ADDRESS DUNN, DOUG
CITY-ST-ZIP 13553 PINE VILLA
FT MYERS, FL 00000TITLE ☐ Change ☒ Addition
NAME D
STREET ADDRESS Gillaspie, Thomas
CITY-ST-ZIP 15831 Anderson Lane
Fort Myers, FL 33912TITLE ☐ Delete
NAME VD
STREET ADDRESS STRAYHORN, GUY
CITY-ST-ZIP 7153 RIVER ROAD
FT MYERS SHORES, FL00000TITLE ☐ Change ☒ Addition
NAME D
STREET ADDRESS Holbrook, James
CITY-ST-ZIP 12250 Coconut Creek Court
Fort Myers, FL 33908TITLE ☐ Delete
NAME CB
STREET ADDRESS FERRELL, SAMUEL
CITY-ST-ZIP 471 BLUE LAGOON LANE
NORTH FT. MYERS FLTITLE ☐ Change ☒ Addition
NAME D
STREET ADDRESS Lanpher, Bill
CITY-ST-ZIP 11207 Oakmont Court
Fort Myers, FL 33908TITLE ☐ Delete
NAME D
STREET ADDRESS PAPARELLA, GUY
CITY-ST-ZIP 16930 TIMBERLAKES DR.
FORT MYERS FLTITLE ☐ Change ☒ Addition
NAME D
STREET ADDRESS Mansell, Elaine
CITY-ST-ZIP 18251 Park Ridge Court
Fort Myers, FL 33908TITLE ☐ Delete
NAME D
STREET ADDRESS WHEELER, HARRY
CITY-ST-ZIP 16941 TIMBERLAKES DRIVE
FORT MYERS FLTITLE ☐ Change ☒ Addition
NAME SEC
STREET ADDRESS Roedding, Gordon
CITY-ST-ZIP 1719 Oakley Ave.
Fort Myers, FL 33901TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/10/02 (941) 936-3319

CR2E037 (9/01)