

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 732579

FILED
Feb 01, 2005
Secretary of State

Entity Name: CYPRESS LAKE UNITED METHODIST CHURCH, INC.

Current Principal Place of Business:

8570 CYPRESS LAKE DRIVE
FT. MYERS, FL 33919

New Principal Place of Business:

Current Mailing Address:

8570 CYPRESS LAKE DRIVE
FT. MYERS, FL 33919

New Mailing Address:

FEI Number: 59-1533907

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HARRISON, GORDON G
3823 SE 13TH AVE.
CAPE CORAL, FL 33904 US

Name and Address of New Registered Agent:

HARRISON, GORDON G
1833 HENDRY ST
FORT MYERS, FL 33901 US

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:

02/01/2005

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: CT () Delete
Name: ASPENGREN, ARTHUR
Address: 14421 HICKORY FAIRWAY CT.
City-St-Zip: FORT MYERS, FL 33912

Title: CAC () Delete
Name: LINDSEY, JOHN
Address: 8943 CARILLON ESTATES WAY
City-St-Zip: FORT MYERS, FL 33912

Title: LLD () Delete
Name: MCGREGOR, BETH
Address: 636 ASTARIAS CIR.
City-St-Zip: FORT MYERS, FL 33919

Title: CST () Delete
Name: DORMER, SUZANNE
Address: 14591 GLEN COVE DR., #1201
City-St-Zip: FORT MYERS, FL 33919

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: CT (X) Change () Addition
Name: LIDDLE, ROB
Address: 9231 CRYSTAL VIEW COURT
City-St-Zip: FORT MYERS, FL 33912

Title: CAC (X) Change () Addition
Name: SIMPSON, KIM
Address: 12150 HIDDEN LINKS DRIVE
City-St-Zip: FORT MYERS, FL 33913

Title: LLD (X) Change () Addition
Name: BAYS, ZIGGIE
Address: 16728 WELLINGTON LAKES CIRCLE
City-St-Zip: FORT MYERS, FL 33908

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: SUZANNE DORMER

CST

02/01/2005

Electronic Signature of Signing Officer or Director

Date