

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 739331

FILED
Mar 05, 2009
Secretary of State

Entity Name: MESSIAH LUTHERAN CHURCH OF NORTH FORT MYERS,INC.

Current Principal Place of Business:

2691 NE PINE ISLAND RD.
N. FORT MYERS, FL 33909 US

New Principal Place of Business:

2691 NE PINE ISLAND RD.
N. FT. MYERS, FL 33909 US

Current Mailing Address:

2691 NE PINE ISLAND RD.
CAPE CORAL, FL 33909 US

New Mailing Address:

FEI Number: 59-1720677 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

MAY, CHARLES D
2691 NE PINE ISLAND RD.
NORTH FORT MYERS, FL 33909 US

Name and Address of New Registered Agent:

MAY, CHARLES D
2691 NE PINE ISLAND RD.
CAPE CORAL, FL 33909 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: CHARLES D. MAY

03/05/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: SAMUEL, DAVID
Address: 2300 VALPARAISO
City-St-Zip: N. FT. MYERS, FL 33917

Title: VPD () Delete
Name: SHERMAN, RICHARD
Address: 5845 ALCA VISTA
City-St-Zip: PUNTA GORDA, FL 33950

Title: TD () Delete
Name: DONLAN, BETTY
Address: 3635 LONG IRON COURT
City-St-Zip: N. FT. MYERS, FL 33917

Title: SD () Delete
Name: WEISS, CLAUDIA
Address: 19760 COTTONFIELD ROAD
City-St-Zip: NORTH FORT MYERS, FL 33917

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: KAYE, PENNY
Address: 1410 ARGYLE DRIVE
City-St-Zip: FT. MYERS, FL 33919 US

Title: VPD (X) Change () Addition
Name: ALLISON, EDWARD
Address: 1812 NE 3RD COURT
City-St-Zip: CAPE CORAL, FL 33909 US

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

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

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: PENNY KAYE

PD

03/05/2009

Electronic Signature of Signing Officer or Director

Date