

# 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Sep 12, 2005 8:00 am**  
**Secretary of State**

09-12-2005 90003 004 \*\*\*\*61.25

**DOCUMENT # 748299**

1. Entity Name  
**EDGEWOOD UNITED METHODIST CHURCH OF FORT MYERS**



Principal Place of Business  
**930 FREEMONT STREET  
FORT MYERS, FL 33916**

Mailing Address  
**930 FREEMONT STREET  
FORT MYERS, FL 33916**

**50066447**



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

07282005 Chg-NP CR2E037 (10/03)

City & State

City & State

4. FEI Number  
**65-0048828**

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

**VERNON, PAUL  
545 WILDWOOD PKWY  
CAPE CORAL, FL 33904**

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 September 7, 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

T ☐ Delete  
NAME CLUTZ, CLARENCE  
STREET ADDRESS 2165 DELTA STREET  
CITY-ST-ZIP FORT MYERS, FL 33907

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

D ☐ Delete  
NAME MCDANIEL, JAMES  
STREET ADDRESS 3720 HYDE PARK DR.  
CITY-ST-ZIP FORT MYERS, FL 33905

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

D ☐ Delete  
NAME VANZEE, MEL  
STREET ADDRESS 1016 SUPERIOR ST.  
CITY-ST-ZIP FORT MYERS, FL 33916

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

P ☐ Delete  
NAME STONE, WILLARD  
STREET ADDRESS 1016 SUPERIOR ST. 169  
CITY-ST-ZIP FT MYERS, FL 33916

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

D ☐ Delete  
NAME NEUBERT, MARTY  
STREET ADDRESS 231 OKLAHOMA AVE.  
CITY-ST-ZIP FORT MYERS, FL 33905

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

D ☒ Delete  
NAME TREDINICK, FRED  
STREET ADDRESS 17101 CAROLYN LANE  
CITY-ST-ZIP NORTH FORT MYERS, FL 33917

☐ 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

150005

Date

239-334-1533

Daytime Phone #