

**2003 NOT-FOR-PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
May 05, 2003 8:00 am
Secretary of State

05-05-2003 90730 021 ****61.25

DOCUMENT # 759973

1. Entity Name

**CAPE CORAL COMMUNITY CHURCH, A FREE METHODIST CO
NGREGATION, INC.**



Principal Place of Business

**811 SANTA BARBARA BLVD
CAPE CORAL FL 33991-2072**

Mailing Address

**811 SANTA BARBARA BLVD
CAPE CORAL FL 33991-2072**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number **59-2126216**

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

Name **DIANA CNEY**

Street Address (P.O. Box Number is Not Acceptable)

910 S.W. 6th CT.

City **CAPE CORAL**

FL

Zip Code **33991**

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 **Diana Cney**

DIANA CNEY

4/30/03

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25

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 **D** ☐ Delete
NAME **ELLIOTT, BILL**
STREET ADDRESS **630 SW SANTA BARBARA PL**
CITY-ST-ZIP **CAPE CORAL FL 33991**

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

TITLE **C-D** ☐ Delete
NAME **RIGBY, DAVID A**
STREET ADDRESS **106 SW 9TH ST**
CITY-ST-ZIP **CAPE CORAL FL 33991**

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

TITLE **SD** ☐ Delete
NAME **WALTER, RUTH**
STREET ADDRESS **5257 ELM CT**
CITY-ST-ZIP **CAPE CORAL FL 33904**

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

TITLE ☒ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **Director** ☒ Change ☐ Addition
NAME **Denny Gearhart**
STREET ADDRESS **2201 SW 2nd TERR**
CITY-ST-ZIP **CAPE CORAL FL 33991**

TITLE **D** ☐ Delete
NAME **BURGOS, JOSE**
STREET ADDRESS **140 SE 23RD TERRACE**
CITY-ST-ZIP **CAPE CORAL FL 33990**

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

TITLE **TD** ☐ Delete
NAME **GORDON, DOUG**
STREET ADDRESS **2522 NW 10 TERR**
CITY-ST-ZIP **CAPE CORAL FL 33993**

TITLE ☐ 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: **Church Administrator** **4/30/03** **5741148**

CR2E037 (10/02)