

FILE NOW: FILING FEE IS \$61.25

FILED

Feb 27 1998 8:00am
Secretary of State

NONPROFIT
CORPORATION
ANNUAL REPORT
1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 769950 (7)

1. Corporation Name

GRACE PRESBYTERIAN CHURCH OF SAN CARLOS PARK, FO
RT MYERS, FLORIDA, INC.

Principal Place of Business

Mailing Address

7470 HICKORY RD., SE
FORT MYERS FL 33912

7470 HICKORY RD., SE
FORT MYERS FL 33912



3. Date Incorporated or Qualified

08/23/1983

4. FEI Number

65-0343105

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

7. Is this nonprofit corporation a homeowners association?

☐ Yes ☒ No

8. This corporation owes or has paid the current year intangible
Personal Property Tax due June 30. ☐ Yes ☒ No

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

23 City & State

27 City & State

24 Zip

Country

28 Zip

Country

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

AICHINGER, FRANK
8040 HARVESTWOOD COURT
ESTERO FL 33928

81 Name

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

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept, the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

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

FRANK AICHINGER, PASTOR

2/17/98

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE PD
NAME BEZENBERG, JAMES
STREET ADDRESS 21125 BUTCHERS HOLLOW
CITY-ST-ZIP ESTERO FL ☐ DELETE

1.1 TITLE ☐ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

TITLE VD
NAME JOHNSON, LARRY
STREET ADDRESS 17524 LAUREL VALLEY RD
CITY-ST-ZIP FT MYERS FL ☐ DELETE

2.1 TITLE ☐ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

TITLE SD
NAME GATES, GEORGIA
STREET ADDRESS 4700 W. BROADWAY 250
CITY-ST-ZIP ESTERO FL ☒ DELETE

3.1 TITLE SD ☒ Change ☐ Addition
3.2 NAME ELAINE BROCK
3.3 STREET ADDRESS 17260 LEE RD.
3.4 CITY-ST-ZIP FORT MYERS FL 33912

TITLE D
NAME GONZALEZ, CLAUDIA
STREET ADDRESS 18283 LOUISE DR
CITY-ST-ZIP FT MYERS FL 33912 ☐ DELETE

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

TITLE DT
NAME SHEEHAN, CATHERINE
STREET ADDRESS 8248 SAN CARLOS BLVD.
CITY-ST-ZIP FORT MYERS FL 33912 ☒ DELETE

5.1 TITLE DT ☒ Change ☐ Addition
5.2 NAME SKINNER, MARY GAYLE
5.3 STREET ADDRESS 17745 INDIAN ISLAND CT
5.4 CITY-ST-ZIP FORT MYERS, FL 33908

TITLE D
NAME BABCOCK, STEPHEN
STREET ADDRESS 17389 DUQUESNE RD.
CITY-ST-ZIP BONITA SPRINGS FL ☐ DELETE

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Handwritten signature: Mary Gayle Skinner

TREASURER

2/17/98

941-482-8969

CP25037 (10/97)