

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 770373

FILED
Apr 13, 2009
Secretary of State

Entity Name: BETHLEHEM LUTHERAN CHURCH OF FORT MYERS SHORES, FORT MYERS, FLORIDA, INC.

Current Principal Place of Business:

14531 OLD OLGA ROAD
FORT MYERS, FL 33905 US

New Principal Place of Business:

Current Mailing Address:

14531 OLD OLGA ROAD
FORT MYERS, FL 33905 US

New Mailing Address:

FEI Number: 59-2370291

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HARDER, THOMAS J
2107 ST CROIX AVE
FT MYERS, FL 33905 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PR () Delete
Name: HARDER, THOMAS
Address: 2107 ST. CROIX AVE
City-St-Zip: FORT MYERS, FL 33905

Title: VPID () Delete
Name: ALFARO, SERGIO
Address: 13730 PEACE ROAD
City-St-Zip: FORT MYERS, FL 33095

Title: S () Delete
Name: KUHN, MARLENE
Address: 2956 RENEE COURT
City-St-Zip: FORT MYERS, FL 33905

Title: TR () Delete
Name: LEWANDOWSKI, ROGER
Address: 11643 BENTWOOD COURT
City-St-Zip: NORTH FORT MYERS, FL 33917

Title: D () Delete
Name: KIRSCH, JEFF
Address: 15817 KEYGRASS LANE
City-St-Zip: FORT MYERS, FL 33905

Title: D () Delete
Name: MUELLER, RON
Address: 9822 CREEKDDWOOD LN
City-St-Zip: FORT MYERS, FL 33905

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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: THOMAS HARDER

PR

04/13/2009

Electronic Signature of Signing Officer or Director

Date