

# **2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F04000004894

**FILED**  
**Apr 26, 2010**  
**Secretary of State**

**Entity Name:** CHUCK PETERSON MINISTRIES: ALIVE & WELL, INC.

**Current Principal Place of Business:**

9700 BLUE STONE CIRCLE  
FORT MYERS, FL 33913

**New Principal Place of Business:**

**Current Mailing Address:**

9700 BLUE STONE CIRCLE  
FORT MYERS, FL 33913

**New Mailing Address:**

**FEI Number:** 41-1913929

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

PETERSON, CHUCK  
9700 BLUE STONE CIRCLE  
FORT MYERS, FL 33913 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:** C  
**Name:** LINDER, DAVE  
**Address:** 5438 132ND STREET  
**City-St-Zip:** SAVAGE, MN 55378

**Title:** VC  
**Name:** LINDER, CHERI  
**Address:** 5438 132ND STREET  
**City-St-Zip:** SAVAGE, MN 55378

**Title:** PS  
**Name:** PETERSON, LINDA  
**Address:** 9700 BLUE STONE CIRCLE  
**City-St-Zip:** FORT MYERS, FL 33913

**Title:** VP  
**Name:** PETERSON, CHUCK  
**Address:** 9700 BLUE STONE CIRCLE  
**City-St-Zip:** FORT MYERS, FL 33913

I hereby 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 all other like empowered.

**SIGNATURE:** LINDA PETERSON

PS

04/26/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date