## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N00000004883

Name:

Address: City-St-Zip: HODGE, ELIZABETH E

FORT MYERS, FL 33967

8401 TAHITI ROAD

Entity Name: FT MYERS-NAPLES CHURCH INC

FILED Feb 19, 2009 Secretary of State

Thirty reality is the first ELECTRICATE, into									
Current Principal Place of Business:					New Principal Place of Business:				
301 E PINE ORLANDO		400							
Current Mailing Address:					New Mailing Address:				
16520 S TA BLDG 18 S FORT MYE	UITE 293								
FEI Number:	59-3663998	FEI Numl	oer Applied For ( )	FEI Nun	nber Not Appli	icable ( )	Certificate of	Status Desired (X)	
Name and	Address o	f Current Re	gistered Agent:		Name and	Address o	f New Register	ed Agent:	
HALL, STEVEN 17310 CALOOSA TRACE CIRCLE FORT MYERS, FL 33967 US					HALL, STEVEN D 17310 CALOOSA TRACE CIRCLE FORT MYERS, FL 33967 US				
The above in the State		ty submits thi	s statement for the p	ourpose o	f changing it	s registered	d office or regist	ered agent, or bo	oth,
SIGNATURE: STEVEN D HALL					02/19/2009				
	Elect	ronic Signatu	re of Registered Age	ent			Date		
OFFICERS AND DIRECTORS:					ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:				
Title: Name: Address: City-St-Zip:	DT HALL, STEV 17310 CALC FT, MYERS	OOSA TRACE C	IR		Title: Name: Address: City-St-Zip:		() Change () Ad	dition	
Title: Name: Address: City-St-Zip:	DP MITCHELL, 255 WILLOU NAPLES, FL	JGHBY DR			Title: Name: Address: City-St-Zip:		() Change () Ad	dition	
Title: Name: Address: City-St-Zip:		( ) Delete DEANNA L MIAMI TR BLD RS, FL 33908	18 STE 253		Title: Name: Address: City-St-Zip:	DS NEWBURG, 3907 16 ST LEHIGH ACF		ldition	
Title: Name: Address: City-St-Zip:		( ) Delete PHILLIP S MIAMI TR BLD RS, FL 33908	18 STE 253		Title: Name: Address: City-St-Zip:	D HODGE, ELI 8401 TAHITI FORT MYER		dition	
Title:	D	(X) Delete			Title:		() Change () Ad	dition	

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.

Name:

Address:

City-St-Zip:

SIGNATURE: STEVEN D HALL DT 02/19/2009