2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 15, 2009
Secretary of State

DOCUMENT# N00767

Entity Name: APOSTOLIC CHRISTIAN CHURCH OF NORTH FORT MYERS, INCORPORATED

Current Principal Place of Business:

2801 RUSTIC LANE
NORTH FT MYERS, FL 33903

New Principal Place of Business:

Current Mailing Address:

2801 RUSTIC LANE
NORTH FT MYERS, FL 33903

New Mailing Address:

FEI Number: 59-2635467 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

VOGEL, STANLEY
14240 A & W BULB RD
FT. MYERS, FL 33908 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:	D	( ) Delete
Name:	HAERR, RAY	
Address:	142 SW 52ND TERRACE	
City-St-Zip:	CAPE CORAL, FL 33914	
Title:	D	( ) Delete
Name:	BRUELLMAN, LARRY	
Address:	2022 TERRAZZO LANE	
City-St-Zip:	NAPLES, FL 24117	
Title:	D	( ) Delete
Name:	HANY, ROBERT	
Address:	7430 LAKE BREEZE DRIVE BLDG# 20, UNIT#503	
City-St-Zip:	FT MYERS, FL 33907	
Title:	C	( ) Delete
Name:	STEFFEN, MARVIN	
Address:	3880 10TH AVE S E	
City-St-Zip:	NAPLES, FL 24117	
Title:	D	( ) Delete
Name:	SCHOCK, NORM	
Address:	4560 ESTERO BLVD UNIT# 204	
City-St-Zip:	FORT MYERS, FL 33931	
Title:	S	( ) Delete
Name:	HUETTE, JANE	
Address:	4819 S.W. AVE	
City-St-Zip:	CAPE CORAL, FL 33914	

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
Name:	
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: STANLEY VOGEL TREA 01/15/2009

Electronic Signature of Signing Officer or Director — Date