

**2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N01308

**FILED**  
**Mar 03, 2004**  
**Secretary of State****Entity Name:** THE FORT MYERS DISTRICT OF THE UNITED METHODIST CHURCH, INC.**Current Principal Place of Business:**3820 COLONIAL BLVD #103  
FORT MYERS, FL 33912**New Principal Place of Business:****Current Mailing Address:**3820 COLONIAL BLVD #103  
FORT MYERS, FL 33912**New Mailing Address:****FEI Number:** 59-2317390**FEI Number Applied For ( )****FEI Number Not Applicable ( )****Certificate of Status Desired ( )****Name and Address of Current Registered Agent:**PATCH, SHARON E  
3820 COLONIAL BLVD #103  
FORT MYERS, FL 33912 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: P ( ) Delete  
Name: SAUTER, TED REV  
Address: 6000 GOODLETTE ROAD  
City-St-Zip: NAPLES, FL 34019

Title: S ( ) Delete  
Name: JOHNSON, BUDD REV  
Address: 10691 CROCKETT STREET  
City-St-Zip: BONITA SPRINGS, FL 34135

Title: VP ( ) Delete  
Name: SIZER, CHARLES MR  
Address: 3958 LAPALMA AVENUE  
City-St-Zip: FORT MYERS, FL 33901

Title: D ( ) Delete  
Name: PATCH, SHARON REV  
Address: 3820 COLONIAL BLVD  
City-St-Zip: FORT MYERS, FL 33912

Title: D ( ) Delete  
Name: ZACKERELLI, DAVID MR  
Address: 9534 CAMPBELL CIRCLE  
City-St-Zip: NAPLES, FL 34109

Title: D ( ) Delete  
Name: RIVERS, RALPH REV  
Address: 2951 TRAIL DAIRY CIRCLE  
City-St-Zip: NORTH FORT MYERS, FL 33917

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: P (X) Change ( ) Addition  
Name: SAUTER, TED REV  
Address: 6000 GOODLETTE ROAD  
City-St-Zip: NAPLES, FL 34109

Title: S (X) Change ( ) Addition  
Name: JOHNSON, BUDD REV  
Address: 27690 SHRIVER AVE  
City-St-Zip: BONITA SPRINGS, FL 34135

Title: VP (X) Change ( ) Addition  
Name: JAY, GOFORTH REV  
Address: P O BOX 310  
City-St-Zip: LABELLE, FL 33975

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

Title: D (X) Change ( ) Addition  
Name: ZICCARELLI, DAVID MR  
Address: 9534 CAMPBELL CIRCLE  
City-St-Zip: NAPLES, FL 34109

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

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: SHARON E PATCH

REV

03/03/2004

Electronic Signature of Signing Officer or Director

Date