

FILE NOW: FILING FEE AFTER MAY 1 IS \$155.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED
AND
FILED

95 MAR 16 AM 11:08

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # N02458 (0)

1. Corporation Name

THE FIRST CHURCH OF THE BRETHREN OF NORTH FORT MYERS, FLORIDA, INC.

Principal Place of Business

Mailing Address

% REVEREND WILBUR A. MARTIN
1691 PACIFIC AVENUE
NORTH FORT MYERS FL 33903

% REVEREND WILBUR A. MARTIN
1691 PACIFIC AVENUE
NORTH FORT MYERS FL 33903

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

04/10/1984

3a. Date of Last Report

03/11/1994

4. FEI Number

05-0011146

Applied For

Not Applicable

2. Principal Place of Business

2a. Mailing Address

21 Church of the Brethren 26 % Ernest H. Miller
Suite, Apt. #, etc.

22 1691 Pacific Ave. 27 1611 Vivian Lane
City & State

23 N. Ft. Myers, FL 28 N. Ft. Myers, FL
Zip Country

24 33903 25 U.S.A. 29 33903 30 U.S.A.

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

7. Nonprofit with IRS 501(c)(3)
Tax Exempt Status

☒

\$68.75 Supplemental
Fee Not Required

8. This corporation has liability for intangible tax under S. 199.032,
Florida Statutes

☐ Yes

☒ No

9. Name and Address of Current Registered Agent

EARHART, SARA
1340 PINEY RD
NO. FORT MYERS FL 33903

10. Name and Address of New Registered Agent

01 Name

02 Street Address (P.O. Box Number is Not Acceptable)

03

04 City

FL

05 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and fee 4 applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE PD
NAME MARTIN, REV. WILBUR A.
STREET ADDRESS 7110 COON RD
CITY-ST-ZIP N. FT. MYERS FL

1.1 TITLE ☐ Change ☐ Addition

TITLE SD
NAME EARHART, SARA
STREET ADDRESS 1340 PINEY RD
CITY-ST-ZIP N. FT. MYERS FL

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

TITLE TD
NAME MILLER, ELVA
STREET ADDRESS 1611 VIVIAN LANE
CITY-ST-ZIP N. FT. MYERS FL

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

TITLE DAM
NAME MILLER, ERNEST
STREET ADDRESS 1611 VIVIAN LN.
CITY-ST-ZIP N. FORT MYERS FL

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

TITLE D
NAME HORNER, MERRICK
STREET ADDRESS 677 CAMELLIA DRIVE
CITY-ST-ZIP N. FT. MYERS FL

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 017, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Elva Miller

Elva Miller

3-9-95

995-5071

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Telephone