

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000006900

FILED
Jul 17, 2012
Secretary of State

Entity Name: FULL GOSPEL ASSEMBLY OF FT. MYERS, INC.

Current Principal Place of Business:

2420 HIGHLAND AVE
FORT MYERS, FL 33916

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 6962
FORT MYERS, FL 33911 US

New Mailing Address:

P.O. BOX 6962
FORT MYERS, FL 33911

FEI Number: 20-1533598

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

GABRIEL, JOSEPH
2501 DAVIS ST
FORT MYERS, FL 33916 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: PCEO
Name: GABRIEL, JOSEPH ED/D
Address: 2501 DAVIS ST
City-St-Zip: FT. MYERS, FL 33916

Title: D
Name: CENATUS, OCCEL
Address: 4720 WEST DR
City-St-Zip: FT MYERS, FL 33907

Title: CSD
Name: GABRIEL, NATACHA
Address: 2501 DAVIS ST
City-St-Zip: FT. MYERS, FL 33916

Title: EVPD
Name: ETIENNE, EMY REV
Address: 749 NE 82ND STREET
City-St-Zip: MIAMI, FL 33138

Title: TD
Name: DESSOURCES, RIBELIA
Address: 3025 BROADWAY APT.#73
City-St-Zip: FORT MYERS, FL 33901

Title: D
Name: MILFORT, GERDA
Address: 420 NE 147TH TER.
City-St-Zip: NORTH MIAMI, FL 33161

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: NATACHA GABRIEL

CSD

07/17/2012

Electronic Signature of Signing Officer or Director

Date