

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000006902

FILED
May 01, 2012
Secretary of State

Entity Name: EBENEZER CHRISTIAN ACADEMY OF FORT 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:

FEI Number: 20-1545729

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

GABRIEL, JOSEPH
2501 DAVIS STREET
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: P
Name: GABRIEL, JOSEPH R D
Address: 2501 DAVIS STREET
City-St-Zip: FORT MYERS, FL 33916

Title: V
Name: GOEHLE, LISA
Address: 502 EMPIRE AVE. SOUTH
City-St-Zip: LEHIGH ACRES, FL 33974

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

Title: D
Name: GOOD, JEFF
Address: 3558 HERITAGE LN.
City-St-Zip: FORT MYERS, FL 33908

Title: D
Name: SOTTONG, TED
Address: 15645 OCEAN WALK CIR. #109
City-St-Zip: FORT MYERS, FL 33908

Title: ST
Name: DESCOLLINE, FRANCESCA
Address: 3025 BROADWAY AVE APT 73
City-St-Zip: FORT MYERS, FL 33901

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

D

05/01/2012

Electronic Signature of Signing Officer or Director

Date