

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000010425

FILED  
Mar 23, 2009  
Secretary of State

**Entity Name:** NORTH FORT MYERS PRESBYTERIAN CHURCH, INC.

**Current Principal Place of Business:**

3160 KUTAK RD  
FORT MYERS, FL 33916

**New Principal Place of Business:**

2801 TRAIL DAIRY CIRCLE  
N. FT. MYERS, FL 33917

**Current Mailing Address:**

3160 KUTAK RD  
FORT MYERS, FL 33916

**New Mailing Address:**

**FEI Number:** 20-0472992      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

BURDETTE, WILLIAM P. MR.  
3160 KUTAK RD  
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: PD      ( ) Delete  
Name: GLADDING, LLOYD D DOCTOR  
Address: 1491 BEECHWOOD TR.  
City-St-Zip: FORT MYERS, FL 33919

Title: SD      ( ) Delete  
Name: JORDAN, EARL R  
Address: 1503 SE 31ST TERRACE  
City-St-Zip: CAPE CORAL, FL 33904

Title: TD      ( ) Delete  
Name: BURDETTE, WILLIAM P MR.  
Address: 16291 SAM SNEAD LANE  
City-St-Zip: NORTH FORT MYERS, FL 33917

Title: D      ( ) Delete  
Name: FESSEL, RICHARD C MR.  
Address: 118 SE 38TH TERRACE  
City-St-Zip: CAPE CORAL, FL 33904

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

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

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

Title: TD      (X) Change ( ) Addition  
Name: BURDETTE, WILLIAM P MR.  
Address: 15291 SAM SNEAD LANE  
City-St-Zip: NORTH FORT MYERS, FL 33917

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: WILLIAM P. BURDETTE

TD

03/23/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date