

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 30, 2007 8:00 am
Secretary of State

04-30-2007 90385 028 ****61.25

DOCUMENT # N04000000062

1. Entity Name

LIGHT OF THE GLADES CHURCH, INC.



Principal Place of Business

12670 NEW BRITTANY BLVD., SUITE 101
FORT MYERS FL 33907

Mailing Address

PO BOX 1038
ESTERO FL 33928

2. Principal Place of Business - No P.O. Box #

8754 River Homes

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

Lane #307

City & State

City & State

Zip

Country

Zip

Country

33135

USA

1st MOORE

CR2E037 (10/06)

4. FEI Number

20-0574059

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

ROYSTON, ROBERT D JR.
12670 NEW BRITTANY BLVD., SUITE 101
FORT MYERS FL 33907

7. Name and Address of New Registered Agent

Name Steven Graebner

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

8754 River Homes Lane #307

City

Bonita Springs

FL

Zip Code

33135

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Steven Graebner

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

4-16-07

DATE

FILE NOW: FEE IS \$61.25
Due By May 1, 2007

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE D ☐ Delete
NAME GRAEBNER, STEVEN
STREET ADDRESS 8754 RIVER HOMES LANE # 307
CITY-ST-ZIP BONITA SPRINGS FL 34135

TITLE D ☐ Delete
NAME GUEST, BERT
STREET ADDRESS 18193 HORSESHOE BAY CIRCLE
CITY-ST-ZIP FORT MYERS FL 33912

TITLE D ☐ Delete
NAME GUEST, DIANA
STREET ADDRESS 18193 HORSESHOE BAY CIRCLE
CITY-ST-ZIP FORT MYERS FL 33912

TITLE C ☐ Delete
NAME RADDATZ, MICHAEL
STREET ADDRESS 17401 STERLING LAKES DRIVE
CITY-ST-ZIP FORT MYERS FL 33912

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Bert Guest

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-13-2007 234437-8009

Date

Daytime Phone #