

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
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Secretary of State

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1. Entity Name
**CHURCH OF THE NAZARENE MISSION FORT MYERS,
INC.**



Principal Place of Business
**7570 GRADY DR.
FT. MYERS, FL 33917**

Mailing Address
**7570 GRADY DR.
FT. MYERS, FL 33917**



05052008 No Chg-NP

CR2E037 (4/06)

DO NOT WRITE IN THIS SPACE

4. FEI Number
87-0792507

Applied For
Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**CHRISTOPHER, CHRISTIAN C.
7570 GRADY DR.
FT. MYERS, FL 33917**

**DO NOT WRITE
IN THIS SPACE**

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 **CHRISTIAN C. CHRISTOPHER**

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

Christian C. Christopher

(NOTE: Registered Agent signature required when reinstating)

May 4, 2008

DATE

**Filing Fee is \$61.25
Due by September 12, 2008**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE **D**
NAME **CHRISTOPHER, CHRISTIAN C.**
STREET ADDRESS **7570 GRADY DR.**
CITY-ST-ZIP **FT. MYERS, FL 33917**

TITLE **D**
NAME **CHRISTOPHER, CARRIE L.**
STREET ADDRESS **7570 GRADY DR.**
CITY-ST-ZIP **FT. MYERS, FL 33917**

TITLE **D**
NAME **CHRISTOPHER, RICHARD**
STREET ADDRESS **323 EVERGREEN RD.**
CITY-ST-ZIP **N. FT. MYERS, FL 33917**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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.

Christian C. Christopher

May 6, 2008