

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N12230

FILED  
Jul 03, 2008  
Secretary of State

**Entity Name:** NORTH FORT MYERS CHURCH OF CHRIST, INC.

**Current Principal Place of Business:**

200 PINE ISLAND RD.  
N.FT.MYERS, FL 339033742

**New Principal Place of Business:**

**Current Mailing Address:**

200 PINE ISLAND RD.  
N.FT.MYERS, FL 33903 US

**New Mailing Address:**

**FEI Number:** 59-2233589 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

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

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

FORD, VERNON E  
18119 SANDY PINES CIRCLE  
N FT MYERS, FL 33917 US

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: D ( ) Delete  
Name: LELAND, TRUEX,  
Address: 19547 CHARLESTON CIR  
City-St-Zip: N FT MYERS, FL 33917 US

Title: T ( ) Delete  
Name: FORD, STEVEN D.,  
Address: 740 PONDELLA RD. A-104  
City-St-Zip: N. FORT MYERS, FL 33903 US

Title: SD ( ) Delete  
Name: FORD, VERNON E.,  
Address: 18119 SANDY PINES CIR  
City-St-Zip: N FT MYERS, FL 33917 US

Title: AT ( ) Delete  
Name: TIPTON, MIKE,  
Address: 18300 LYNN ROAD  
City-St-Zip: N FT MYERS, FL 33917 US

Title: VP ( ) Delete  
Name: TIPTON, WINSTON,  
Address: 18300 LYNN ROAD  
City-St-Zip: N FT MYERS, FL 33917 US

Title: AT ( ) Delete  
Name: DOWLER, JIM,  
Address: 7692 MARX DR  
City-St-Zip: N FT MYERS, FL 33917 US

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

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

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

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

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

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

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: VERNON E. FORD

TREA

07/03/2008

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date