## 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N17185

FILED Jan 04, 2006 Secretary of State

Entity Name: LAMB OF GOD EPISCOPAL CHURCH OF LEE COUNTY, INC.

Current Principal Place of Business: New Principal Place of Business:

19691 CYPRESS VIEW DRIVE FORT MYERS, FL 33912

Current Mailing Address: New Mailing Address:

19691 CYPRESS VIEW DRIVE FORT MYERS, FL 33912

FEI Number: 59-2765787 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

COOTER, ERIC S 19691 CYPRESS VIEW DRIVE FORT MYERS, FL 33912 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:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: V () Delete Title: V (X) Change () Addition
Name: KIBBEY, LORNA Name: KIBBEY, LORNA

 Address:
 18508 ESATSHORE DR.
 Address:
 18508 EAST SHORE DR.

 City-St-Zip:
 FT. MYERS, FL 33912
 City-St-Zip:
 FT. MYERS, FL 33912

Title: P ( ) Delete Title: P (X) Change ( ) Addition Name: KIGBGY, KEITH Name: KIBBEY, KEITH

 Address:
 18508 EAST SHORE DR
 Address:
 18508 EAST SHORE DR

 City-St-Zip:
 FORT MYERS, FL 33912
 City-St-Zip:
 FORT MYERS, FL 33912

 Name:
 COOTER, ERIC
 Name:
 WASHBURN, DAVID

 Address:
 18008 HORSESHOE BAY CIR
 Address:
 12750 CHARDON COURT

 City-St-Zip:
 FORT MYERS, FL 33912
 City-St-Zip:
 FORT MYERS, FL 33912

Title: D ( ) Delete Title: D (X) Change ( ) Addition
Name: YOUNG, DENNIS Name: ZANT, NANCY

Address: PO BOX 07353 Address: 6970 SAINT EDMONDS LOOP City-St-Zip: FORT MYERS, FL 33913 City-St-Zip: FORT MYERS, FL 33913

 Title:
 D
 ( ) Delete
 Title:
 D
 (X) Change ( ) Addition

Name: SMALL, ANNE Name: SMALL, TOM

 Address:
 4611 TORREY PINE CT
 Address:
 4611 TORREY PINE CT

 City-St-Zip:
 ESTERO, FL 33928
 City-St-Zip:
 ESTERO, FL 33928

I hereby certify that the information supplied with this filing does not qualify for the 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: KEITH KIBBEY P 01/04/2006