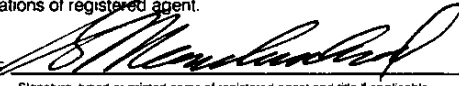
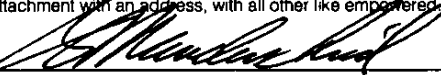


2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 10, 2008 8:00 am
Secretary of State

03-10-2008 90059 021 ****70.00

DOCUMENT # N20488 1. Entity Name FORT MYERS EVANGELICAL FREE CHURCH, INC.					
Principal Place of Business 6798 PLANTATION PINES BLVD FORT MYERS, FL 33966-1392 US			Mailing Address 6798 PLANTATION PINES BLVD FORT MYERS, FL 33966-1392 US		
2. Principal Place of Business - No P.O. Box #		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country	4. FEI Number 65-0135590	
5. Certificate of Status Desired ☐				\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent MANDERSCHIED, BERND 9070 PASEO DE VALENCIA STREET FORT MYERS, FL 33908			7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City		
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.			DATE 3-05-08		
SIGNATURE  Signature, typed or printed name of registered agent and title if applicable.			(NOTE: Registered Agent signature required when reinstating)		
Filing Fee is \$61.25 Due by May 1, 2008		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			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D FORD, MICHAEL S MR 15291 TAHITIAN DR FORT MYERS, FL 33908 ☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP ☒ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SONNENBERG, DANIEL 17429 ARIZONS RD FORT MYERS, FL 33912 ☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	S ☒ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP VERMILLION, LARRY 1401 NE 14TH TERR CAPE CORAL, FL 339091583 ☒ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P MANDERSCHIED, BERND 9070 PASCO DEVALENCIA STREET FORT MYERS, FL 33908 ☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
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: 			B. MANDERSCHIED		
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR			Date 3-5-08 Daytime Phone # 239 851-9481		