

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 16, 2007 8:00 am
Secretary of State

02-16-2007 90028 026 ****61.25

DOCUMENT # N24181 1. Entity Name CHURCH OF THE CROSS OF LEE COUNTY, INC.					
Principal Place of Business 13500 FRESHMAN LANE FORT MYERS, FL 33912			Mailing Address 13500 FRESHMAN LANE FORT MYERS, FL 33912		
2. Principal Place of Business - No P.O. Box # Suite, Apt. #, etc. City & State Zip Country		3. Mailing Address Suite, Apt. #, etc. City & State Zip Country			
4. FEI Number 65-0015924				Applied For ☐ Not Applicable	
5. Certificate of Status Desired ☐				\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent LELAND, HOWARD 13500 FRESHMAN LANE FORT MYERS, FL 33912			7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code		
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 _____ Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE					
Filing 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			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S LEWSI, MARY JO 1496 CHARMONT PLACE FORT MYERS, FL 33919	☐ Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DV WILDMAN, WILLIAM 9331 OLDE HICKORY CIRCLE FORT MYERS, FL 33912	☐ Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D WARNER, DAN 9932 BELLA VISTA CT FORT MYERS, FL 33913	☐ Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D LELAND, HOWARD 14541 EAGLE RIFGE DRIVE FORT MYERS, FL 33912	☐ Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VM CASON, AL 7753 WOODLAND BEND CIRCLE FORT MYERS, FL 33912	☐ Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	M KUNKEL, FRED 6804 DANIEL CT. FORT MYERS, FL 33908	☐ Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ED DE GUZMAN 7553 WOODLAND BEND CIRCLE FORT MYERS FL 33912				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MIKE MONGOVEN 1444 DU BONNET COURT FORT MYERS FL 33919				
☐ Change ☐ Addition					
☐ Change ☐ Addition					
☐ Change ☐ Addition					
☐ 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: <u>Howard L. Leland</u> - HOWARD L. LELAND 2/13/07 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #					

40018751



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