

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N24181

FILED
Feb 10, 2009
Secretary of State

Entity Name: CHURCH OF THE CROSS OF LEE COUNTY, INC.

Current Principal Place of Business:

13500 FRESHMAN LANE
FORT MYERS, FL 33912

New Principal Place of Business:

Current Mailing Address:

13500 FRESHMAN LANE
FORT MYERS, FL 33912

New Mailing Address:

FEI Number: 65-0015924

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LELAND, HOWARD
13500 FRESHMAN LANE
FORT MYERS, FL 33912 US

Name and Address of New Registered Agent:

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: DE GUZMAN, ED
Address: 7553 WOODLAND BEND CIRCLE
City-St-Zip: FORT MYERS, FL 33919

Title: D () Delete
Name: MONGOVEN, MIKE
Address: 1444 DU BONNET COURT
City-St-Zip: FORT MYERS, FL 33912

Title: D () Delete
Name: WARNER, DAN
Address: 9932 BELLA VISTA CT
City-St-Zip: FORT MYERS, FL 33913

Title: D () Delete
Name: LELAND, HOWARD
Address: 14541 EAGLE RIFGE DRIVE
City-St-Zip: FORT MYERS, FL 33912

Title: VM () Delete
Name: CASON, AL
Address: 7753 WOODLAND BEND CIRCLE
City-St-Zip: FORT MYERS, FL 33912

Title: M () Delete
Name: KUNKEL, FRED
Address: 6604 DANIEL CT.
City-St-Zip: FORT MYERS, FL 33908

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: M (X) Change () Addition
Name: ANFINSEN, RICHARD
Address: 12265 CHAMPIONSHIP CIRCLE
City-St-Zip: FORT MYERS, FL 33913

Title: D (X) Change () Addition
Name: LEWIS, MARY JO
Address: 1496 CHARMONT PLACE
City-St-Zip: FORT MYERS, FL 33919

Title: D (X) Change () Addition
Name: CRAIG, ELIZABETH
Address: 14340 BRISTOL BAY PLACE #104
City-St-Zip: FORT MYERS, FL 33912

Title: D (X) Change () Addition
Name: HUMBLE, JEAN
Address: 15541 MEADOW CIRCLE
City-St-Zip: FORT MYERS, FL 33908

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

Title: D (X) Change () Addition
Name: ROBINSON, JIM
Address: 6900 ERIN MARIE COURT
City-St-Zip: FORT MYERS, FL 33919

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: AL CASON

VM

02/10/2009

Electronic Signature of Signing Officer or Director

Date