## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N28563

FILED Mar 11, 2009 Secretary of State

Entity Name: FAITH UNITED METHODIST CHURCH OF FORT MYERS, INC.

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

C/O JOHN MCCLUER

15690 MCGREGOR BLVD

FORT MYERS, FL 33908 US

C/O RONALD SCHAFER

15690 MCGREGOR BLVD

FORT MYERS, FL 33908 US

Current Mailing Address: New Mailing Address:

C/O MELISSA STOTT 15690 MCGREGOR BLVD FORT MYERS, FL 33908 US

FEI Number: 65-0131989 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired (X)

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

MCCLUER, JOHN

15690 MCGREGOR BLVD
FORT MYERS, FL 33908 US

SCHAFER, RONALD
15690 MCGREGOR BLVD
FORT MYERS, FL 33908 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: RONALD SCHAFER 03/11/2009

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D () Delete Title: D (X) Change () Addition Name: STEFFEY, BARBARA MRS.

Address: 16299 SAN CARLOS BLVD., #696 Address: 4745 ESTERO BLVD., #503

City-St-Zip: FORT MYERS, FL 33908 City-St-Zip: FORT MYERS BEACH, FL 33931

Title: S ( ) Delete Title: ( ) Change ( ) Addition Name: STUMP, JEAN MRS. Name:

 Name:
 STUMP, JEAN MRS.
 Name:

 Address:
 12541 KELLY SANDS WAY, #17
 Address:

 City-St-Zip:
 FORT MYERS, FL 33908
 City-St-Zip:

Title: () Delete Title: (X) Change ( ) Addition MCCLUER, JOHN Name: WHITEMORE, JOHN MR. Name: 12841 KELLY BAY CT. 9110 SOUTHMONT COVE, #301 Address: Address: City-St-Zip: FORT MYERS, FL 33908 City-St-Zip: FORT MYERS, FL 33908

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

 Name:
 SCHAFER, RON
 Name:
 SCHAFER, RON

 Address:
 500 ESTERO BLVD., #696
 Address:
 500 ESTERO BLVD., #696

 City-St-Zip:
 FORT MYERS BEACH, FL 33931
 City-St-Zip:
 FORT MYERS BEACH, FL 33931

Title: VP ( ) Delete Title: ( ) Change ( ) Addition

 Name:
 WALLY, LEWIS
 Name:

 Address:
 12720 KELLY PALM DR.
 Address:

 City-St-Zip:
 FORT MYERS, FL 33908
 City-St-Zip:

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

 Name:
 DAILEY, JOHN MR.
 Name:

 Address:
 5430 PEPPERTREE DR.
 Address:

 City-St-Zip:
 FORT MYERS, FL 33908
 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: RONALD SCHAFER MR. 03/11/2009