

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N28563

FILED  
Feb 09, 2012  
Secretary of State

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

**Current Principal Place of Business:**

C/O JAMES MCCABE  
15690 MCGREGOR BLVD  
FORT MYERS, FL 33908 US

**New Principal Place of Business:**

C/O MICHAEL PACHECO  
15690 MCGREGOR BLVD  
FORT MYERS, FL 33908 US

**Current Mailing Address:**

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

**New Mailing Address:**

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

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

MCCABE, JAMES MR.  
15690 MCGREGOR BLVD  
FORT MYERS, FL 33908 US

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

PACHECO, MICHAEL MR.  
1106 SE 4TH AVE.  
CAPE CORAL, FL 33990 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: MICHAEL PACHECO

02/09/2012

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: P  
Name: PACHECO, MICHAEL MR.  
Address: 1106 SE 4TH AVE.  
City-St-Zip: CAPE CORAL, FL 33990

Title: S  
Name: DUFINETZ, CHRISTIE MS.  
Address: 15188 PORTSIDE DR.  
City-St-Zip: FORT MYERS, FL 33908

Title: D  
Name: KRATT, JAMES MR.  
Address: 11430 HEIDI LEE LANE  
City-St-Zip: FORT MYERS, FL 33908

Title: VP  
Name: MCCLUER, JOHN MR.  
Address: 12841 KELLY BAY CT.  
City-St-Zip: FORT MYERS, FL 33908

Title: D  
Name: DAILEY, JOHN MR.  
Address: 15790 CATALPA COVE DR.  
City-St-Zip: FORT MYERS, FL 33908

Title: D  
Name: JOHNSTON, MICHAEL MR.  
Address: 19124 PINE RUN LANE  
City-St-Zip: FORT MYERS, FL 33967

I hereby 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 all other like empowered.

SIGNATURE: MICHAEL PACHECO

MR.

02/09/2012

Electronic Signature of Signing Officer or Director

Date