## 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N41919

Apr 24, 2012 Secretary of State

Entity Name: ALL SOULS EPISCOPAL CHURCH, INC.

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

14640 N CLEVELAND AVE

NORTH FORT MYERS, FL 33903 US

**Current Mailing Address: New Mailing Address:** 

14640 N CLEVELAND AVE

NORTH FORT MYERS, FL 33903 US

FEI Number: 65-0151247 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

KELMEREIT, ALAN 4554 SPRINGVIEW CIRCLE LABELLE, FL 33935

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:**

JOHNSON, JIM E Name:

Address: 950 MOODY RDUNIT #119 City-St-Zip: NORTH FT. MYERS, FL 33903 US

Title:

Name: WALKER, CAROL Address: 429 HIDDEN COVE RD City-St-Zip: N FT MYERS, FL 33917 US

Title:

KETO, JAMES Name: Address: 5476 SAN LUIS DR.

City-St-Zip: NORTH FT MYERS, FL 33903 US

Title:

Name: JOY, JOAN E

10511 LAKE LOOP ROAD Address: City-St-Zip: N FT MYERS, FL 33903 US

Title:

KELMEREIT, ALAN REV Name: 4554 SPRINGVIEW CIRCLE Address: LABELLE, FL 33935 City-St-Zip:

Title:

KELLY, BARBARA M Name: Address: 5341 SW 9TH PLACE CAPE CORAL, FL 33914 City-St-Zip:

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: BARBARA M KELLY T 04/24/2012