



**2005 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jul 05, 2005 08:00 AM
Secretary of State

DOCUMENT # N43845 1. Entity Name GOOD NEWS OF JESUS CHRIST FELLOWSHIP CHURCH OF FORT MYERS, INC.	
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Principal Place of Business % JOHN LEDBETTER JR 3640 MARION ST FT MYERS, FL 33916-1708	Mailing Address % JOHN LEDBETTER JR 3640 MARION ST FT MYERS, FL 33916-1708
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DO NOT WRITE IN THIS SPACE


06292005 No Chg-NP CR2E037 (10/03)
4. FEI Number
65-0236588
5. Certificate of Status Desired ☐ **\$8.75** Additional
Fee Required

6. Name and Address of Current Registered Agent
**LEDBETTER JR, JOHN
3640 MARION ST
FT MYERS, FL 33919**

**DO NOT WRITE
IN THIS SPACE**

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 *John Ledbetter Jr* **6-29-05**
(NOTE: Registered Agent signature required when reinstating) DATE

Filing Fee is \$61.25 Due by September 7, 2005	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PD LEDBETTER, JOHN JR 3640 MARION ST FT MYERS, FL
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VD LEDBETTER, NORRIS D. 3640 MARION ST. FT MYERS, FL
TITLE NAME STREET ADDRESS CITY - ST - ZIP	SD HARRIS, CHYANNE 3640 MARION ST FORT MYERS, FL 33916
TITLE NAME STREET ADDRESS CITY - ST - ZIP	TD LEDBETTER, MARGARET 3640 MARION ST FT MYERS, FL
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	

**DO NOT WRITE
IN THIS SPACE**

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07/05/05-80025-004 61.25

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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: *John Ledbetter Jr*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #