

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N43845

FILED
Feb 10, 2009
Secretary of State

Entity Name: GOOD NEWS OF JESUS CHRIST FELLOWSHIP CHURCH OF FORT MYERS, INC.

Current Principal Place of Business:

% JOHN LEDBETTER JR
3640 MARION ST
FT MYERS, FL 339161708

New Principal Place of Business:

Current Mailing Address:

% JOHN LEDBETTER JR
3640 MARION ST
FT MYERS, FL 339161708

New Mailing Address:

FEI Number: 65-0236588

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LEDBETTER JR, JOHN
3640 MARION ST
FT MYERS, FL 33919 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: PD () Delete
Name: LEDBETTER, JOHN JR,
Address: 3640 MARION ST
City-St-Zip: FT MYERS, FL

Title: VD () Delete
Name: LEDBETTER, NORRIS D.
Address: 928 SOUTHEAST 21ST STREET
City-St-Zip: CAPE CORAL, FL 33990

Title: SD () Delete
Name: HARRIS, CHYANNE
Address: 3640 MARION ST
City-St-Zip: FORT MYERS, FL 33916

Title: TD () Delete
Name: LEDBETTER, MARGARET,
Address: 3640 MARION ST
City-St-Zip: FT MYERS, FL

Title: S () Delete
Name: LEDBETTER, NANCY
Address: 928 SOUTHEAST 21ST STREET
City-St-Zip: CAPE CORAL, FL 33990

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

Title: A (X) Change () Addition
Name: TORRES, OLGA,
Address: 2211 LOTUS RD.
City-St-Zip: FT MYERS, FL 33905

Title: () Change () Addition
Name:
Address:
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: NANCY LEDBETTER

S

02/10/2009

Electronic Signature of Signing Officer or Director

Date

043845

Entity Name LEDBETTER, JOHN JR
Street Address 3640 MARION ST
City, State FT MYERS, FL
Zip Code & Country

Name And Address #2

Title VD
Name (Last, First, Middle, Title) LEDBETTER, NORRIS D.
Street Address 928 SOUTHEAST 21ST STREET
City, State CAPE CORAL, FL
Zip Code & Country 33990

Name And Address #3

Title SD
Name (Last, First, Middle, Title) HARRIS, CHYANNE
Street Address 3640 MARION ST
City, State FORT MYERS, FL
Zip Code & Country 33916

Name And Address #4

Title A
Entity Name TORRES, OLGA
Street Address 2211 LOTUS RD.
City, State FT MYERS, FL
Zip Code & Country 33905

Name And Address #5

Title S
Name (Last, First, Middle, Title) LEDBETTER, NANCY
Street Address 928 SOUTHEAST 21ST STREET
City, State CAPE CORAL, FL
Zip Code & Country 33990

Title S
Officer/Director Signature NANCY LEDBETTER

[Continue](#)