

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N94000000008

FILED  
Apr 21, 2009  
Secretary of State

Entity Name: FELLSMERE HISTORICAL CHURCH, INC.

**Current Principal Place of Business:**

39 N. BROADWAY  
FELLSMERE, FL 32948 US

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 997  
FELLSMERE, FL 32948 US

**New Mailing Address:**

FEI Number: 59-0475968      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

VANDEVOORDE, RENE' G  
1327 N. CENTRAL AVENUE  
SEBASTIAN, FL 32958 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: P ( ) Delete  
Name: COSNER, CHRIS  
Address: 498 COPLY TERR  
City-St-Zip: SEBASTIAN, FL 32958

Title: D ( ) Delete  
Name: SPRINGER, LARRY  
Address: 14070 79TH T.  
City-St-Zip: FELLSMERE, FL 32958

Title: D ( ) Delete  
Name: LANTZ, STEVE  
Address: 14020 105TH ST  
City-St-Zip: FELLSMERE, FL

Title: D ( ) Delete  
Name: HASUGA, NICKLOS  
Address: 8176 97TH AVE  
City-St-Zip: VERO BEACH, FL 329673871

Title: D ( ) Delete  
Name: VOTAPKA, LINDA  
Address: 8405 75TH CT  
City-St-Zip: VERO BEACH, FL 32967

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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

Title: D (X) Change ( ) Addition  
Name: LANTZ, STEVE  
Address: 14020 105TH ST  
City-St-Zip: FELLSMERE, FL 32958

Title: D (X) Change ( ) Addition  
Name: COE, POLLY  
Address: 98 N. BAY ST.  
City-St-Zip: FELLSMERE, FL 32948

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: CHRIS COSNER

P

04/21/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date