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Jun 18 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Northam, Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **N97000000506 (2)**

1. Corporation Name

**UNIVERSITY BAPTIST CHURCH OF SOUTH FORT MYERS, I
NC.**

Principal Place of Business

**17568-2 ROCKEFELLER CIRCLE
FORT MYERS FL 33912**

Mailing Address

**16520 SO TAMiami TRAIL STE 18-212
FORT MYERS FL 33908**

3. Date Incorporated or Qualified

01/27/1997

4. FEI Number

65-0720890

☒ Applied For
☐ Not Applicable

2. Principal Place of Business

21900 River Road

2a. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Estero FL

City & State

Suite, Apt. #, etc.

Zip

33928

Country

USA

Zip

33908

Country

USA

9. Name and Address of Current Registered Agent

**THOMPSON, TIMOTHY W SR
17568-2 ROCKEFELLER CIRCLE
FORT MYERS FL 33912**

10. Name and Address of New Registered Agent

81 Name

STENDER, RON

82 Street Address (P.O. Box Number is Not Acceptable)

20600 PINE TREE LANE

83

84 City
ESTERO

FL

85 Zip Code
33928

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

[Signature]

(NOTE: Registered Agent signature required when reinstating)

4-29-98

DATE

12. OFFICERS AND DIRECTORS

TITLE **PD** ☒ DELETE

NAME **THOMPSON, TIMOTHY W SR**
STREET ADDRESS **17568-2 ROCKEFELLER CIRCLE**
CITY-ST-ZIP **FORT MYERS FL 33912**

TITLE **VD** ☒ DELETE

NAME **STENDER, RON**
STREET ADDRESS **20600 PINE TREE LANE**
CITY-ST-ZIP **ESTERO FL 33928**

TITLE **SD** ☒ DELETE

NAME **JONES, CYNTHIA**
STREET ADDRESS **27504-2 RIVERWOOD DRIVE**
CITY-ST-ZIP **BONITA SPRINGS FL 34134**

TITLE **TD** ☒ DELETE

NAME **OSBORN, SHARON**
STREET ADDRESS **20502 HONOLULU COURT**
CITY-ST-ZIP **ESTERO FL 33928**

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE **STENDER, RON** ☒ Change ☐ Addition

1.2 NAME **20600 PINE TREE LANE**
1.3 STREET ADDRESS **ESTERO FL 33928**

1.4 CITY-ST-ZIP

2.1 TITLE **VD** ☒ Change ☐ Addition

2.2 NAME **RYBICKI, JUDIE**
2.3 STREET ADDRESS **20580 PINE TREE LANE**
2.4 CITY-ST-ZIP **ESTERO FL 33928**

3.1 TITLE **SD** ☒ Change ☐ Addition

3.2 NAME **QUICKE, DEBBIE**
3.3 STREET ADDRESS **18612 EVERGREEN RD**
3.4 CITY-ST-ZIP **FORT MYERS, FL 33912**

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

[Signature]

4-29-98

**941
498 0578**

CR2E037 (10/97)