
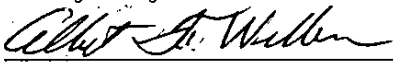
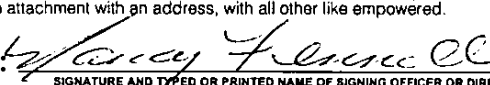


2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 23, 2007 8:00 am
Secretary of State

03-23-2007 90013 048 ****61.25

DOCUMENT # N99000000096 1. Entity Name FORT MYERS MONTHLY MEETING OF THE RELIGIOUS SOCIETY OF FRIENDS, INC.					
Principal Place of Business IONA HOUSE, CALUSA NATURE CENTER ORTIZ AVENUE FORT MYERS, FL			Mailing Address C/O N. FENNELL 52 FENNY BOSK TRAIL VENUS, FL 33960		
2. Principal Place of Business - No P.O. Box #		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State		4. FEI Number 65-0607361	
Zip		Country		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent	
WEBBER, ALBERT F 335 NAUTILUS COURT FORT MYERS, FL 33908				Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
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. <div style="display: flex; justify-content: space-between; align-items: flex-end;"> <div style="width: 30%;"> SIGNATURE  <small>Signature, typed or printed name of registered agent and title if applicable.</small> </div> <div style="width: 30%; text-align: center;"> <small>(NOTE: Registered Agent signature required when reinstating)</small> </div> <div style="width: 30%; text-align: right;"> <small>DATE</small> </div> </div>					
Filing Fee is \$61.25 Due by May 1, 2007		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$5.00 May Be Added to Fees	
Make check payable to Florida Department of State					
10. OFFICERS AND DIRECTORS				11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D FENNELL, NANCY 52 FENNY BOSK TRAIL VENUS, FL 33960 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D HOWELL, NANCY 1728 LAKEVIEW BLVD NORTH FORT MYERS, FL 33903 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D WEBBER, ALBERT F 335 NAUTILUS COURT FORT MYERS, FL 33908 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D FAY, HANK 431 VAN BUREN ST., E-2 FORT MYERS, FL 33916 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D FRENCH, DAVID 2030 EMBARCADERO WAY NORTH FORT MYERS, FL 33917 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D STANLEY, PHYLLIS 10 BETH STACES BLVD APT 114 LEHIGH ACRES, FL 33936 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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:  <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>				03/18/07 <small>Date</small>	
<small>Daytime Phone #</small>					

40040127



01282007 Chg-NP CR2E037 (12/06)



Division of Corporations

2007 Annual Report

40040127

Listed below is the most recent information reported for the entity.
Please review and click the appropriate button at the bottom to generate the
annual report form.

This information cannot be changed on the report.	
Document Number	N99000000096
Business Entity Name	FORT MYERS MONTHLY MEETING OF THE RELIGIOUS SOCIETY OF FRIENDS, INC.
Original File Date	01/07/1999

FEI Number 65-0607361

Principal Address IONA HOUSE, CALUSA NATURE CENTER
ORTIZ AVENUE
FORT MYERS, FLMailing Address C/O N. FENNELL
52 FENNY BOSK TRAIL
VENUS, FL 33960Registered Agent ALBERT F WEBBER
335 NAUTILUS COURT
FORT MYERS, FL 33908 US

Officer/Director Name And Address

D
NANCY FENNELL
52 FENNY BOSK TRAIL
VENUS, FL 33960D
NANCY HOWELL
1728 LAKEVIEW BLVD
NORTH FORT MYERS, FL 33903D
ALBERT F WEBBER
335 NAUTILUS COURT
FORT MYERS, FL 33908D
HANK-FAY

ATTACHMENT

40040127
#19900000096
431 VAN BUREN ST., E-2
FORT MYERS, FL 33916

D
DAVID FRENCH
2030 EMBARCADERO WAY
NORTH FORT MYERS, FL 33917

D
PHYLLIS STANLEY
10 BETH STACES BLVD APT 114
LEHIGH ACRES, FL 33936

If all of the above
information is correct and
you do not wish to make
any changes, please
select:

No Changes

If you need to make
changes to the above
information, please
select:

Make Changes

Sunbiz Home Page

Help