

2000 UNIFORM BUSINESS REPORT (UBR)

3/

DOCUMENT # N99000003080

1. Entity Name

GATEWAY TRINITY CHURCH ENDURING GIFTS FOUNDATION

FILED
May 02, 2000 8:00 am
Secretary of State

03-03-2000 90244 035 ****70.00

Principal Place of Business Mailing Address
11381 GATEWAY BLVD 11381 GATEWAY BLVD
FORT MYERS FL 33913 FORT MYERS FL 33913-7937

2. Principal Place of Business 3. Mailing Address
Suite, Apt. #, etc. Suite, Apt. #, etc.
City & State City & State

Zip Country Zip Country
USA USA

4. FEI Number Applied For
Not Applicable

5. Certificate of Status Desired X \$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent
DORAGH, PETE
ANNIS MITCHELL COCKEY EDWARDS & ROEHN PA
12800 UNIVERSITY DRIVE
FORT MYERS FL 33907

7. Name and Address of New Registered Agent
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.

SIGNATURE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW:
FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐ \$5.00 May Be
Added to Fees

Make Check Payable to
Department of State

10. OFFICERS AND DIRECTORS
TITLE NAME STREET ADDRESS CITY-ST-ZIP
President Nancy Campbell T 12651 Eagle Point Circle Ft. Myers, FL 33913
Treasurer Calvin H. Beals T 11780 Lakeshire Court Fort Myers, FL 33913
Secretary Peter Doragh T 12071 WEDGE DR Ft. Myers, FL 33913
Robert Jones T 2319 LA SALLE RD Ft. Myers, FL 33907
Robert Welliver T 21340 Pelican Islands DR #201 ESTERO, FL 33298
William Stehn T 12481 MONDIE BLVD W Ft. Myers, FL 33913

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10
TITLE NAME STREET ADDRESS CITY-ST-ZIP
Change Addition
Change Addition
Change Addition
Change Addition
Change Addition
Change Addition

12. 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 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.

941/561-1188

SIGNATURE: Calvin H. Beals, Feb. 23, 2000

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (9/99)