

**2025 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N02458

**Entity Name:** THE FIRST CHURCH OF THE BRETHREN OF NORTH FORT MYERS, FLORIDA, INC.

**Current Principal Place of Business:**

1691 PACIFIC AVE.  
NORTH FORT MYERS, FL 33903

**Current Mailing Address:**

FIRST CHURCH OF THE BRETHREN OF NORTH FORT MYERS  
PO BOX 4565  
NORTH FORT MYERS, FL 33918 US

**FEI Number:** 05-0011146

**Certificate of Status Desired:** No

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

THE FIRST CHURCH OF THE BRETHR  
FIRST CHURCH OF THE BRETHREN OF NORTH FORT MYERS  
PO BOX 4565  
NORTH FORT MYERS, FL 33918 US

*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:** GLORIA ROHLFING

01/22/2025

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title LEADERSHIP TEAM CHAIR  
Name MILLER, DANNY  
Address FIRST CHURCH OF THE BRETHREN  
OF NORTH FORT MYERS.  
PO BOX 4565  
City-State-Zip: NORTH FORT MYERS FL 33918

Title TREASURER  
Name ROHLFING, GLORIA  
Address FIRST CHURCH OF THE BRETHREN  
OF NORTH FORT MYERS  
PO BOX 4565  
City-State-Zip: NORTH FORT MYERS FL 33918

Title SECRETARY  
Name JAMES, PENNY  
Address FIRST CHURCH OF THE BRETHREN  
OF NORTH FORT MYERS  
PO BOX 4565  
City-State-Zip: NORTH FORT MYERS FL 33918

*I hereby 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 all other like empowered.*

**SIGNATURE:** GLORIA ROHLFING

**TREASURER**

01/22/2025

Electronic Signature of Signing Officer/Director Detail

Date