

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 25, 2001 8:00 am
Secretary of State

04-25-2001 90172 046 ****61.25

0070244

DOCUMENT # 720885

1. Entity Name

THE CHAPEL-BY-THE-SEA

Principal Place of Business

100 CHAPEL STREET
 FORT MYERS BEACH FL 33931-3202

Mailing Address

100 CHAPEL STREET
 FORT MYERS BEACH FL 33931-3202

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number **59-1163471**

Applied For
 Not Applicable

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



DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

PEDERSEN,KJELL
2555 ESTERO BLVD
FT MYERS BEACH FL 33931

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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW:
FEES 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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	D	<input type="checkbox"/> Delete
NAME	LITCHFIELD, ADELLE D	
STREET ADDRESS	4253 BAY BEACH LN #D2	
CITY-ST-ZIP	FT. MYERS BEACH FL 33931	
TITLE	PD	<input checked="" type="checkbox"/> Delete
NAME	SEEDS, STAN	
STREET ADDRESS	14610 HIGHLAND HARBOUR	
CITY-ST-ZIP	FT. MYERS FL 33908	
TITLE	D	<input type="checkbox"/> Delete
NAME	WELTON, ROGER S	
STREET ADDRESS	4263 BAY BEACH LANE #114	
CITY-ST-ZIP	FT. MYERS BEACH FL	
TITLE	ST	<input type="checkbox"/> Delete
NAME	WEINSTROER, ANN T	
STREET ADDRESS	16400 MILLSTONE CIR #106	
CITY-ST-ZIP	FT MYERS BCH FL 33908	
TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	SEEDS, STAN	
STREET ADDRESS	14610 HIGHLAND HARBOUR	
CITY-ST-ZIP	FT. MYERS FL 33908	
TITLE	D	<input type="checkbox"/> Delete
NAME	TYLER, BARTLETT	
STREET ADDRESS	7148 ESTERO BLVD #120E	
CITY-ST-ZIP	FT MYERS FL 33931	

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

D. WIENSTROER, ANN T.
16400 MILLSTONE CIRCLE #106
FT MYERS, FL 33908

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.

SIGNATURE: _____ Date _____ Daytime Phone # _____

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E037 (10/00)