

2000 UNIFORM BUSINESS REPORT (UBR)

FILED

Feb 07, 2000 8:00 an
Secretary of State

02-07-2000 90073 009 ****61.25

DOCUMENT # 755717

1. Entity Name

UNITED ARTS COUNCIL OF COLLIER COUNTY, INC.

Principal Place of Business

Mailing Address

1051 5TH AVE S
SUITE 300
NAPLES FL 33940-4435
US

1051 5TH AVE S
SUITE 300
NAPLES FL 34102-6413
US

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

59-2070580

Applied

Not Applied

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

CARDILLO, JOHN P.
3550 TAMiami TRAIL E.
NAPLES FL 33962

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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE PD ☒ Delete
NAME BROWN, MARILYN
STREET ADDRESS 704 HOLLYBRIAR LN
CITY-ST-ZIP NAPLES FL 34110

TITLE TD ☒ Delete
NAME RUCKER, ROBIN
STREET ADDRESS 4001 TAMiami TR N
CITY-ST-ZIP NAPLES FL 34103

TITLE D ☐ Delete
NAME LELONEK, JOY
STREET ADDRESS 7024 PELICAN BAY BLVD
CITY-ST-ZIP NAPLES FL 34108

TITLE V ☒ Delete
NAME GRUSZKA, MARY M
STREET ADDRESS 807 RIVERPOINT DR #103D
CITY-ST-ZIP NAPLES FL 33942

TITLE SD ☐ Delete
NAME STEPHENSON, CONNIE
STREET ADDRESS 3710 ESTEY AVE
CITY-ST-ZIP NAPLES FL

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE PD ☒ Change
NAME Mary Margaret Gruszka
STREET ADDRESS 807 Riverpoint Dr #103
CITY-ST-ZIP Naples, FL 34102

TITLE TD ☒ Change
NAME Dee Dee Nold
STREET ADDRESS 200 Livermore Lane
CITY-ST-ZIP Naples, FL 34119

TITLE ☐ Change
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE V ☒ Change
NAME Jean Gansel
STREET ADDRESS 9159 The Lane
CITY-ST-ZIP Naples, FL 34109

TITLE SD ☒ Change
NAME Lorri Miller
STREET ADDRESS 507 Broad Ave S.
CITY-ST-ZIP Naples, FL 34102

TITLE ☐ Change
NAME
STREET ADDRESS
CITY-ST-ZIP

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 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 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *SIGNATURE NECLUBER K*

1/12/2000

941-263-8