

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # J42154

1. Entity Name

ESL OF NAPLES, INC.

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

05-02-2000 90004 012 ***150.00

Principal Place of Business

Mailing Address

32 TURQUOISE AVE
NAPLES FL 34114
US

P.O. BOX 990688
NAPLES FL 34116-6032
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 59-2742005

Applied For
Not Applicable

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

CARTER, PATSY
4814 32ND AVE SW
NAPLES FL 34116

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

9. This corporation is eligible to satisfy its intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2000 Fee will be \$550.00
Make Check Payable to Department of State

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

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PD
NAME CATER, PATSY B
STREET ADDRESS 4814 32ND AVE SW
CITY-ST-ZIP NAPLES FL 34116 ☒ Delete

TITLE PD
NAME STALLARD, RICHARD
STREET ADDRESS 202 S. EDGEWOOD RD
CITY-ST-ZIP MOUNT VERNON, OH 43050 ☒ Change ☐ Addition

TITLE VPD
NAME HILL, ROBERT L
STREET ADDRESS 1830 4TH ST. SOUTH
CITY-ST-ZIP NAPLES FL 34102 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE C
NAME STALLARD, RICHARD
STREET ADDRESS 202 S. EDGEWOOD RD.
CITY-ST-ZIP MOUNT VERNON OH 43050 ☒ Delete

TITLE Pres.
NAME STALLARD, RICHARD
STREET ADDRESS 202 S. EDGEWOOD RD
CITY-ST-ZIP MOUNT VERNON, OH 43050 ☒ Change ☐ Addition

TITLE S
NAME STALLARD, ANN
STREET ADDRESS 1231 FAIRVIEW RD. NE
CITY-ST-ZIP ATLANTA GA 30306 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE T
NAME JACKSON, CHARLES
STREET ADDRESS P.O. BOX 5164
CITY-ST-ZIP OVELLA TX 75154 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

13. 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 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Patsy B. Carter
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/26/00
Date

941-793-1988
Daytime Phone #

CR2E034 (9/99)