

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N07195

1. Entity Name

DEL-AIR BEACH CLUB ASSOCIATION, INC.

Principal Place of Business

EX ESTERO BLVD.
FT. MYERS BEACH FL 33931-2100

Mailing Address

780 ESTERO BLVD.
FT. MYERS BEACH FL 33931-2100

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

59-2300075

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

SPS, INC.
12065 METRO PKWY
FORT MYERS FL 33912

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

Jeanette F. Massucco

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
NAME
STREET ADDRESS
CITY-ST-ZIP
SCCD
MASSUCV, DONALD
4265 BAY BCH LANE
FT MYERS BCH FL ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
massucco, Donald ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
PDCO
MASSUCO, JEANETTE
4265 BAY BCH LANE
FT MYERS BCH FL ☐ Delete

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
KEOGH, FRANCES
2600 ELVA PLACE
LEHIGH ACRES FL 33971 ☐ Delete

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
SWEETLAND, GENEVERE
5457 NINTH AVE
FORT MYERS FL 33907 ☐ Delete

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
WATTS, RICHARD
8450 SLEEPY HOLLOW DRIVE
WARREN OH 44484 ☐ Delete

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
TD
CHANNELL, DONNA
780 ESERD BLVD
FORT MYERS BEACH FL 33931 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ 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.

SIGNATURE:

Jeanette F. Massucco
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

FILED
Apr 21, 2002 8:00 am
Secretary of State

04-21-2002 90862 016 ****61.25



DO NOT WRITE IN THIS SPACE

CR2E037 (9/01)