

2000 UNIFORM BUSINESS REPORT (UBR)

FILED

Mar 03, 2000 08:00 AM
Secretary of State

DOCUMENT # N19798

1. Entity Name

ISLAND REEF ASSOCIATION, INC.

Principal Place of Business

Mailing Address

1661 ESTERO BLVD.
SUITE 27A
FT. MYERS BEACH
33932

FL

P.O. BOX 6017

FT. MYERS BEACH
33932

FL

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

59-1420198

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

7. Name and Address of New Registered Agent

SUITOR, DOUGLAS G., JR.
1661 ESTERO BLVD 27

FT. MYERS BCH
33932

US

FL

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 **DOUGLAS G. SUITOR**

03/03/2000

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 P ☐ Delete
NAME WHITEMORE ROBERT
STREET ADDRESS 7000 ESTERO BLVD. 600
CITY-ST-ZIP FT MYERS BCH FL

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

TITLE V ☐ Delete
NAME HEISER ERVIN W.
STREET ADDRESS 7000 ESTERO BLVD 205
CITY-ST-ZIP FT. MYERS BEACH FL

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

TITLE D ☐ Delete
NAME MCENROE JACK
STREET ADDRESS RD #2 BOX 112
CITY-ST-ZIP RED HOOK NY

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

TITLE TD ☐ Delete
NAME GUTZLER PAUL
STREET ADDRESS 7000 ESTERO BLVD APT 604
CITY-ST-ZIP FT. MYERS BEACH FL

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

TITLE SD ☐ Delete
NAME PHIFER SHIRLEY
STREET ADDRESS 7000 ESTERO BLVD APT 200
CITY-ST-ZIP FT. MYERS BCH FL

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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 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.