

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N19798

1. Entity Name

ISLAND REEF ASSOCIATION, INC.

FILED
Apr 29, 2002 8:00 am
Secretary of State

04-29-2002 90134 044 ****61.25

Principal Place of Business

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

Mailing Address

P.O. BOX 6017
FT. MYERS BEACH FL 33932

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

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 FL 33932

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 SD ☒ Delete
NAME MCENROE, JACK
STREET ADDRESS 46 POND DRIVE
CITY-ST-ZIP RHINEBECK NY 12572

TITLE P ☐ Change ☒ Addition
NAME CARLA MANDEL
STREET ADDRESS 7000 ESTERO BLVD #601
CITY-ST-ZIP FT MYERS BCH, FL 33931

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

TITLE S ☐ Change ☒ Addition
NAME ARNIE JOHNSON
STREET ADDRESS 400 NARRAGANSETT PLWY
CITY-ST-ZIP WARWICK, RI 02888

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

TITLE ☐ Change ☒ Addition
NAME SHIRLEY PHIPER
STREET ADDRESS 7000 ESTERO BLVD #200
CITY-ST-ZIP FT MYERS BCH, FL 33931

TITLE D ☒ Delete
NAME HEISER, ERVIN DR
STREET ADDRESS 7000 ESTERO BLVD 203
CITY-ST-ZIP FORT MYERS BEACH FL 33931

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

TITLE VD ☐ Delete
NAME TREAT, BOB
STREET ADDRESS 7000 ESTERO BLVD 504
CITY-ST-ZIP FORT MYERS BEACH FL 33931

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.

SIGNATURE:

SIGNATURE REQUIRED
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/14/02

Date

Daytime Phone #

CR2E037 (9/01)