

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 08, 2002 8:00 am
Secretary of State

02-08-2002 90017 014 ****70.00

DOCUMENT # N30481

1. Entity Name

CHAMBER OF COMMERCE OF CAPE CORAL, INC.

Principal Place of Business

2051 CAPE CORAL PKWY.
CAPE CORAL FL 33904
US

Mailing Address

PO BOX 100747
CAPE CORAL FL 33910
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

65-0120687

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

QUAINTANCE, MICHAEL D
2051 CAPE CORAL PKWY
CAPE CORAL FL 33904

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

Michael D. Quaintance

1/9/2002

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 D
NAME AUBUCHON, GARY
STREET ADDRESS 4724-A VINCENES
CITY-ST-ZIP CAPE CORAL FL 33904 ☐ Delete

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

TITLE DC
NAME SPIRO, CHRISTOPHER
STREET ADDRESS 6296 CORPORATE CT. STE B202
CITY-ST-ZIP FT MYERS FL 33919 ☐ Delete

TITLE D
NAME SPIRO, Christopher
STREET ADDRESS 6296 CORPORATE CT. STE B202
CITY-ST-ZIP Ft Myers, FL. 33919 ☒ Change ☐ Addition

TITLE DCE
NAME OSTROWSKY, KEVIN
STREET ADDRESS 1227 S. DEL PRADO BLVD
CITY-ST-ZIP CAPE CORAL FL 33990 ☐ Delete

TITLE DC
NAME OSTROWSKY, Kevin
STREET ADDRESS 6338 Presidential Ct.
CITY-ST-ZIP FORT MYERS FL. 33919 ☒ Change ☐ Addition

TITLE DT
NAME HAUCK, TIM
STREET ADDRESS 1306 LAFAYETTE ST
CITY-ST-ZIP CAPE CORAL FL 33904 ☐ Delete

TITLE DCE
NAME Don Schnell
STREET ADDRESS 455 CAPE CORAL PKWY
CITY-ST-ZIP CAPE CORAL FL. 33904 ☐ Change ☒ Addition

TITLE D
NAME SHIPP, TOM
STREET ADDRESS 4223 S. DEL PRADO BLVD
CITY-ST-ZIP CAPE CORAL FL 33904 ☐ Delete

TITLE D
NAME Elmer Tabor
STREET ADDRESS 4731 VINCEENES Blvd
CITY-ST-ZIP Cape Coral FL 33904 ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
QUAINTANCE, MICHAEL
2051 CAPE CORAL PKWY
CAPE CORAL FL. 33904 ☐ 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:

Michael D. Quaintance President

1/9/2002 (841)549-6900

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (9/01)