

# 2002 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Mar 31, 2002 8:00 am**  
**Secretary of State**

0047023

**DOCUMENT # 703121**

1. Entity Name

**ART LEAGUE OF FORT MYERS, INC.**

03-31-2002 90053 039 \*\*\*\*61.25

Principal Place of Business

Mailing Address

10051 MCGREGOR BLVD  
 SUITE 103  
 FT. MYERS FL 33919

10051 MCGREGOR BLVD  
 SUITE 103  
 FT. MYERS FL 33919

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

**59-1003074**

Applied For

Not Applicable

Zip

Country

Zip

Country

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

**HERZBERG, PAT**  
**1318 MAYFIAR TERRACE**  
**FT MYERS FL 33919**

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 PD ☒ Delete  
 NAME KIMBALL, GAY  
 STREET ADDRESS 9745 FOXGLOVE CIRCLE SW  
 CITY-ST-ZIP FORT MYERS FL 33919

TITLE PD ☒ Change ☐ Addition  
 NAME NICOL, SYLVIA  
 STREET ADDRESS 11637 QUAIL RUN DR.  
 CITY-ST-ZIP Ft. Myers FL 33908

TITLE VPD ☒ Delete  
 NAME NICOL, SYLVIA  
 STREET ADDRESS 11637 QUAIL RUN DR  
 CITY-ST-ZIP FORT MYERS FL 33908

TITLE VPD ☒ Change ☐ Addition  
 NAME Keefe Marianne  
 STREET ADDRESS 10601 Sharon Drive  
 CITY-ST-ZIP N. Ft. Myers FL 33917

TITLE V ☒ Delete  
 NAME KEEFE, MARIANNE  
 STREET ADDRESS 10601 SHARON DRIVE  
 CITY-ST-ZIP N. FT MYERS FL 33917

TITLE V ☒ Change ☐ Addition  
 NAME Brown Susanne  
 STREET ADDRESS 12748 Yacht Club Circle  
 CITY-ST-ZIP Ft Myers, FL 33919

TITLE S ☐ Delete  
 NAME HENRY, RUTH  
 STREET ADDRESS 10820 MEADOWS CT  
 CITY-ST-ZIP NORTH FORT MYERS FL 33903

TITLE T ☒ Change ☐ Addition  
 NAME Miller Earl (Miller Earl)  
 STREET ADDRESS 1757 Llewellyn Dr  
 CITY-ST-ZIP Ft. Myers, FL 33901

TITLE T ☒ Delete  
 NAME FUGERE, DOLORES  
 STREET ADDRESS 10062 BROKEN WOOD CT.  
 CITY-ST-ZIP NORTH FORT MYERS FL 33903

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

TITLE AT ☐ Delete  
 NAME STRONG, EDMUND  
 STREET ADDRESS 24 CARRIAGE LANE  
 CITY-ST-ZIP N. FT MYERS FL 33917

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:**

*Earl Miller* (Earl Miller, Treas.) 3/19/02

Date

Daytime Phone #

CR2E037 (9/01)