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03-05-1999 90107 042 ****61.25

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NONPROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 723788

1. Corporation Name

THE KORESHAN UNITY FOUNDATION, INC.

Principal Place of Business

8661 CORKSCREW RD
ESTERO FL 33928
US

Mailing Address

8661 CORKSCREW RD -
ESTERO FL 33928
US



2. Principal Place of Business

21 Suite, Apt. #, etc.

23 City & State

24 Zip 25 Country

2a. Mailing Address

26 P.O. Box 97

27 Suite, Apt. #, etc.

28 City & State

Estero, FL 33928

29 Zip 30 Country

3. Date Incorporated or Qualified

06/30/1972

4. FEI Number

59-1463053

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

9. Name and Address of Current Registered Agent

COX, JOE B ESQ.
% CUMMINGS & LOCKWOOD
3001 TAMiami TRAIL NORTH, 4TH FLOOR
NAPLES FL 34103

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE PD
NAME BIGELOW, JO
STREET ADDRESS P.O. BOX 464 N/A
CITY-ST-ZIP ESTERO FL 33928

☐ DELETE

TITLE D
NAME HANNA, RUSSELL J.
STREET ADDRESS 60 TROIS COURT
CITY-ST-ZIP FT. MYERS FL

☐ DELETE

TITLE VD
NAME WERTKIN, GERARD
STREET ADDRESS 120 BREWSTER RD.
CITY-ST-ZIP SCARSDALE NY

☐ DELETE

TITLE ~~DD~~ D
NAME POBANZ, DOROTHY
STREET ADDRESS 5107 PELICAN BLVD.
CITY-ST-ZIP CAPE CORAL FL

☐ DELETE

TITLE D
NAME SMITH, KAY
STREET ADDRESS 27600 GROVE ROAD
CITY-ST-ZIP BONITA SPRINGS FL

☒ DELETE

TITLE ~~ATD~~ SD
NAME REA, SARA W
STREET ADDRESS 6777 WINKLER RD F126
CITY-ST-ZIP FT MYERS FL 33919

☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☒ Addition

D
Dauray, Charles
8661 Corkscrew Rd., P.O. Box 97
Estero, FL 33928

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Sara W. Rea* **SARA W. REA, Secretary**

2/23/99

941-992-2184

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (11/98)