

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 737188

1. Entity Name

SENIOR CONNECTIONS OF SOUTHWEST FLORIDA, INC.

Principal Place of Business

475 COWBOY WAY
P.O. BOX 2400
LA BELLE FL 33975-2400
US

Mailing Address

475 COWBOY WAY
P.O. BOX 2400
LA BELLE FL 33975-2400
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

59-1741198

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

SIEMIANOWSKI, TOM
982 HONEYBEE DR.
NAPLES FL 33999

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 NAME STREET ADDRESS CITY-ST-ZIP	P DOWNING, KEN 350 HICKPOOCHIEE LABELLE FL	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP PLUMMER, WESALINE 1001 N. 15TH ST. IMMOKALEE FL	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S LOUKONEN, JOANNE PO BOX 1990, HWY 29 S IMMOKALEE FL 34143	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D DUSCHEN, ANN MARIE 6 MARINA DRIVE LABELLE FL 33935	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D WILLIAMS, MARY 604 S. 5TH STREET IMMOKALEE FL	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T HOLLAND, WINIFRED M 425 DAVIS ST. LABELLE FL 33935	<input type="checkbox"/> Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP	Seth Howard VP 5522 Frontier Circle La Belle FL 33935	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> 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:

[Signature]

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

02/11/02

Date

941/657-6528

Daytime Phone #

CR2E037 (9/01)



DO NOT WRITE IN THIS SPACE

FILED

Mar 04, 2002 8:00 am
Secretary of State

03-04-2002 90030 038 ****61.25

Attachment # 937188 / 500712
Senior Connections of SW FL, Inc.
2001-2002 Regional Board of Trustees
List Revised 1/22/02

1. Ann Marie Duschen (Glades)
At-Large Member

6 Marina Drive
LaBelle, FL 33935
(863) 674-1479
Term Exp.: 2002
Email: amdf1@olsusa.com

2. Winifred M. Holland, (Hendry)
Treasurer

825 Bryan Ave.
LaBelle, FL 33935
(863) 674-4056 (O)
(863) 675-0063 (H)
999-0107 (P)
Term Exp.: 2002*

3. Seth Howard (Glades)
Vice President

5522 Frontier Circle
LaBelle, FL 33935
(863) 675-2221 (O)
(863) 675-4777 (H)
Term Exp: 2002

4. Joanne Loukonen, (Collier)
President

P.O. Box 1990
Immokalee, FL 34143
(941) 657-6528
Term Exp.: 2002
Email: dingdongdaddy@juno.com

5. Dr. Geraldine Nobles (Hendry)
Secretary

P.O. Box 1900
LaBelle, FL 33975
(863) 675-0204 (O)
(863) 675-0595 (H)
Term Exp: 2003

6. Wesaline Plummer, (Collier)
At-Large Member

1001 N. 15th Street
Immokalee, FL 34142

(941) 657-2735
Term Exp: 2002*

7. Mildred Sherrod (Collier)
At-Large Member

P.O. Box 875
Immokalee, FL 34142
(941) 657-2738
Term Exp: 2003*

8. Millard Wagnon (Hendry)
At-Large Member

2230 Waylife Court
Alva, FL 33920
Ph: (941) 728-5332
Term Exp.: 2003

9. Mary Williams (Collier)
At-Large Member

P.O. Box 613
Immokalee, FL 34143
(941) 657-4166
Term Exp: 2002*

10. Duane Wheeler
Local Board Chair, Immokalee

P.O. Box 5222
Immokalee, FL 34143
Phone: 941/657-6799
Term Exp: 2002

11. Mary Ruth Prouty
Local Board Chair, LaBelle

P.O. Box 70
LaBelle, FL 33975
Phone: 863/675-4056, ext. 127
Email: mary_prouty@doh.state.fl.us
Term Expires: 2002

12. Charlotte Baxter
Local Board Chair, Moore Haven

P.O. Box 163
Moore Haven, FL 33471
Phone: 863/946-0056
Term Expires: 2002