

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 18, 2002 8:00 am
Secretary of State

03-18-2002 90079 028 ****61.25

DOCUMENT # 759675

1. Entity Name

ADVERTISING FEDERATION OF SOUTHWEST FLORIDA, INC

Principal Place of Business

Mailing Address

**P O BOX 38
 FT MYERS FL 33902**

**P O BOX 38
 FT MYERS FL 33902**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-1794897

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired

\$8.75 Additional Fee Required



DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**ANDERSON, MICHELE
 3872 KELLY STREET
 FORT MYERS FL 33901**

Name
Gregory L. Weichert
 Street Address (P.O. Box Number is Not Acceptable)
**6296 Corporate Court, SW
 Suite B101**
 City
Fort Myers **FL** Zip Code
33919

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

Gregory L. Weichert, Treasurer

3/6/02

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	T	<input checked="" type="checkbox"/> Delete
NAME	TUCKER, JHANNA	
STREET ADDRESS	9822 COUNTRY OAKS	
CITY-ST-ZIP	FORT MYERS FL 33912	
TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	STILES, CHARLES B	
STREET ADDRESS	12539 BARRINGTON CT. S.W.	
CITY-ST-ZIP	FT. MYERS FL 33903	
TITLE	D	<input type="checkbox"/> Delete
NAME	GOLDSMITH, KERRIE	
STREET ADDRESS	17020 WILLOWCREST WAY	
CITY-ST-ZIP	FT MYERS FL 33908	
TITLE	P	<input checked="" type="checkbox"/> Delete
NAME	GRAY, STEPHEN	
STREET ADDRESS	400 5TH AVE SO STE 202	
CITY-ST-ZIP	FT. MYERS FL 34102	
TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	MARY FUESS	
STREET ADDRESS	PO BOX 3648 N/A	
CITY-ST-ZIP	FT. MYERS FL 33918	
TITLE	VP	<input checked="" type="checkbox"/> Delete
NAME	WELLS, LUDMILLA	
STREET ADDRESS	10501 FCGU BLVD S	
CITY-ST-ZIP	FT MYERS FL 33965	

TITLE	Treasurer T	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Weichert, Gregory	
STREET ADDRESS	6296 Corporate Ct, SW Ste B101	
CITY-ST-ZIP	Fort Myers, FL 33919	
TITLE	Director D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Ryan, John	
STREET ADDRESS	1075 Central Ave	
CITY-ST-ZIP	Naples, FL 34102	
TITLE	President P	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Hagwood, Steven	
STREET ADDRESS	886 110th Ave N Ste 8	
CITY-ST-ZIP	Naples, FL 34108	
TITLE	Vice President VP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Waites, William	
STREET ADDRESS	6296 Corporate Ct, SW Ste B101	
CITY-ST-ZIP	Fort Myers, FL 33919	
TITLE	2nd Vice President VP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Viridinlia, Rick	
STREET ADDRESS	886 110th Ave N, Ste 8	
CITY-ST-ZIP	Naples, FL 34108	

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:

Gregory L. Weichert, Treasurer

Date

Daytime Phone #

CR2E037 (9/01)