

2002 UNIFORM BUSINESS REPORT (UBR)**FILED****Apr 29, 2002 8:00 am**
Secretary of State

04-29-2002 90134 019 ****61.25

DOCUMENT # 759968

1. Entity Name

H.O.P.E. OF LEE COUNTY, INC.

Principal Place of Business

**9470 HEALTHPARK CIR.
FT MYERS FL 33908
US**

Mailing Address

**9470 HEALTHPARK CIR.
FT MYERS FL 33908
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

59-2128697

Applied For

Not Applicable

5. Certificate of Status Desired ☐**\$8.75** Additional
Fee Required

6. Name and Address of Current Registered Agent

**BECKWITH, SAMIRA K.
9470 HEALTHPARK CIR
FT. MYERS FL 33908**

7. Name and Address of New Registered Agent

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 \$61.259. Election Campaign Financing
Trust Fund Contribution. ☐**\$5.00** May Be
Added to Fees**Make Check Payable to
Department of State**

10. OFFICERS AND DIRECTORS

TITLE **P** ☐ Delete**BECKWITH, SAMIRA
9470 HEALTHPARK CIR
FT. MYERS FL 33908**TITLE **D** ☐ Delete**HUNT, JOHN
1203 EVEREST PKWY.
CAPE CORAL FL 33904**TITLE **C** ☐ Delete**ROEPSTORFF, ROBBIE
13000 S. CLEVELAND AVE.
FORT MYERS FL 33907**TITLE **D** ☒ Delete**TUEFEL, TOM
15681 NEW HAMPSHIRE CT.
FORT MYERS FL 33908**TITLE **C** ☐ Delete**WHIDDEN, GROVER
1813 LEE ST.
FORT MYERS FL 33901**TITLE **T** ☐ Delete**SMALLEY, RON
1715 MONROE ST.
FORT MYERS FL 33901**

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☐ Change ☐ AdditionNAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Change ☐ AdditionNAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Change ☐ AdditionNAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Change ☐ AdditionNAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Change ☐ AdditionNAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Change ☐ AdditionNAME
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:

Samira Beckwith
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (9/01)

2002 UNIFORM BUSINESS REPORT (UBR) - Attachment

RE: DOCUMENT #759968 (H.O.P.E. of Lee County, Inc.)

Doc. # 759968
639429

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	P Beckwith, Samira 9470 HealthPark Circle Fort Myers, FL 33908 <input type="checkbox"/> Change <input type="checkbox"/> Addition	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Teufel, Tom 15681 New Hampshire Ct. Fort Myers, FL 33908 <input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	M Lampley, Jill 9470 HealthPark Circle Fort Myers, FL 33908 <input type="checkbox"/> Change <input type="checkbox"/> Addition	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Willenbacher, Leo 2201 Owanita Road Alva, FL 33920 <input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	C Personette, Steve P. O. Box 370--MC 1650 Fort Myers, FL 33902 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VC Smalley, Ron P. O. Box 280 Fort Myers, FL 33902 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T Schestag, Harvey R. 3451 Bonita Bay Blvd., Ste. 202 Bonita Springs, FL 34134-4395 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S Trippe, Gary P. O. Box 60139 Fort Myers, FL 33906 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Hunt, John 1203 Everest Pkwy. Cape Coral, FL 33904 <input type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Markham, Gail 8961 Conference Dr. Fort Myers, FL 33919 <input type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Roepstorff, Robbie 13000 S. Cleveland Ave. Fort Myers, FL 33907 <input type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Whidden, Grover 1813 Lee St. Fort Myers, FL 33901 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D D'Alessandro, Frank 13131 University Dr. Fort Myers, FL 33907 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Idelson, Charles 12751 New Brittany Blvd. Fort Myers, FL 33907 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Wigley, Robert 800 Seatant Drive, #3 Sanibel, FL 33957 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition		