## **2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)**

## DOCUMENT # 768314

1. Entity Name

ECONOMIC DEVELOPMENT COALITION OF LEE COUNTY, IN



**FILED** Jan 17, 2003 8:00 am Secretary of State

01-17-2003 90120 017 \*\*\*\*61.25



Principal Place of Business			Mailing Address		_
C/O DUANE HALL ENGINEERING FORT MYERS FL 33919			6315 PRESIDENTIAL CT. "F" C/O DUANE HALL ENGINEERING FORT MYERS FL 33919		, ''
2 Principal	Place of Business	US 3 Ma	siling Address		
c/o T	KW	'\C,	ailing Address / O T X W		T FORM I HOUR AND LEVEL ILEN THE STAR CHARL CHARL CHARL CHARL CHARL
1 2 5 3 3 3 1	t.#.etc. New Brittany Bly	vd Su	uite, Apt. #, etc. ite 32 <del>-}</del>	SAME	CHECK HERE IF MAKING CHANGES
City & Sta	· ·		ity & State		4. FEI Number <b>59-2298068</b> Applied For
	Myecs, FL.	I O I		The state of the s	Not Applicable
33907	USA	33	907	Country USA	5. Certificate of Status Desired \$8.75 Additional Fee Required
	6. Name and Address of Curre	ent Register	ed Agent		7. Name and Address of New Registered Agent
				Name	
GARNER, JAMES F.				Street	Address (P.O. Box Number is Not Acceptable)
1833 HENDRY ST FT MYERS FL				-	
7 1 7H 1 E	10 T L				
* *.as	•			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. I am familiar with, and accept					
the obliga	ations of registered agent.				·
SIGNATURE					
SIGNATORE	Signature, typed or printed name of registered ag	gent and title if app	oficable. (NOTE: I	Registered Agent signa	ature required when reinstating) DATE
-	FILE NOW: FEE IS \$61.25		<ol><li>Election Camp Trust Fund Cor</li></ol>		\$5.00 May Be Make Check Payable to
<u>Q</u> .		,		nanodion.	Added to Fees Florida Department of State
10.	OFFICERS AND	DIRECTORS		11.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10
TITLE	CD		🖾 Delete	TITLE	☐ Change ☐ Addition {
NAME STREET ADDRESS	SICILIANO, BRUCE 7400 TAMIAMI TRAIL N			NAME	
CITY-ST-ZIP	NAPLES FL 34108			STREET ADDRESS CITY-ST-ZIP	
TITLE	VPD		□ Delete	TITLE	
NAME	DAY, PATRICK		Delete	NAME	PD
STREET ADDRESS	12553 NEW BRITTANY BLVD. (	BLDG 32		STREET ADDRESS	1
CITY-ST-ZIP	FORT MYERS FL 33907			CITY-ST-ZIP	
TITLE NAME	PD COUNTY		☐ Delete	TITLE	TrChange ☐ Addition
	MUSSER, JOHN	ette e		NAME STREET ADDRESS	12553 New Brittany Blvd, Suite 32
CITY-ST-ZIP	6315 PRESIDENTIAL COURT, S   FORT MYERS FL 33919	DIE F		STREET ADDRESS CITY-ST-ZIP	Fort myers, FL.33907
TITLE	ST ST		☐ Delete	TITLE	Wan Date of the second
NAME	JENKINS, JEFFERY		□ D¢i¢(¢	NAME	VPD Change Addition
STREET ADDRESS	12730 NEW BRITTANY BLVD. S	STE 600		STREET ADDRESS	12730 New Brittany Blvd, Suite 600
CITY-ST-ZIP	FORT MYERS FL 33907	. <u>.</u> .		CITY-ST-ZIP	Fort Myers, FL. 33907
TITLE			Delete	TITLE	St Change Addition
NAME STREET ADDRESS				NAME	जंबस्यांडड, जिल्ला कि
CITY-ST-ZIP				STREET ADDRESS CITY-ST-ZIP	13000 S. Cleveland Avenue
TITLE		-	☐ Delete		H'Ort Maroro BI 30003
NAME			□ Délefe	TITLE NAME	Tote Hyers, FL. 33907 Change Addition
STREET ADDRESS				STREET ADDRESS	
CITY-ST-ZIP				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:

1/05/03

239-278-1992