

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 768835

1. Entity Name

Poinsettia Park Social Club, Inc

Principal Place of Business

Poinsettia Park

Mailing Address

4701 Ballard Rd.
Ft Myers, FL 33905

2. Principal Place of Business

Poinsettia Park

Suite, Apt. #, etc.

3. Mailing Address

4701 Ballard Rd.

Suite, Apt. #, etc.

City & State

Ft Myers, FL

Zip

33905

Country

USA

City & State

Ft Myers, FL

Zip

33905

Country

USA

4. FEI Number

59-2432737

Applied For

Not Applicable

5. Certificate of Status Desired

☒

\$8.75 Additional Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

~~Claire H. Boudreau~~ John Colegrove
213 No Poinsettia Drive 108 E Poinsettia Dr.
Ft Myers, FL 33905 Ft Myers, FL 33905

7. Name and Address of New Registered Agent

Name: ~~Claire H. Boudreau~~
Street Address (P.O. Box Number is Not Acceptable):
213 No Poinsettia Drive
Ft Myers, FL
City: Ft Myers FL Zip Code: 33905

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

~~Claire H. Boudreau~~ John Colegrove

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

(NOTE: Registered Agent signature required when reinstating)

DATE

Claire L. Boudreau 4/8/2000

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

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input checked="" type="checkbox"/> Delete
	Patricia Maluec	108 E Poinsettia Dr.	Ft Myers, FL 33905	
TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input checked="" type="checkbox"/> Delete
	Nicholas Nichols	179 W Plaza Ave	Ft Myers, FL 33905	
TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Delete
	Secretary Patricia Wallace	178 W Plaza Ave	Ft Myers, FL 33905	
TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input checked="" type="checkbox"/> Delete
	TREASURER John Colegrove	108 E Poinsettia Dr.	Ft Myers, FL 33905	
TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
	PRESIDENT NICHOLAS NICHOLS	179 W Plaza Ave	Ft Myers, FL 33905	
TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
	VICE-PRESIDENT Charles Wise	107 E Poinsettia Drive	Ft Myers, FL 33905	
TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
	SECRETARY PATRICIA WALLACE	178 W Plaza Ave	Ft Myers, FL 33905	
TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
	TREASURER Claire H. Boudreau	213 No Poinsettia Drive	Ft Myers, Florida 33905	
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:

Claire L. Boudreau, Treasurer 4/8/2000 (941) 693-1818

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (9/99)