

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 30, 2002 8:00 am
Secretary of State

01-30-2002 90042 011 ***158.75

DOCUMENT # F00000000611

1. Entity Name
STRUBLE & COTNEY INVESTMENTS, INC.

Principal Place of Business

201 SAN MATEO DR
BONITA SPRINGS FL 34134
US

Mailing Address

201 SAN MATEO DR
BONITA SPRINGS FL 34134
US

2. Principal Place of Business

356 CROMWELL CT

Suite, Apt. #, etc.

NAPLES

CITY & STATE
FLORIDA

Zip
34108

Country
USA

3. Mailing Address

356 CROMWELL CT.

Suite, Apt. #, etc.

NAPLES

CITY & STATE
FLORIDA

Zip
34108

Country
USA



DO NOT WRITE IN THIS SPACE

4. FEI Number

62-1806201

Applied For

☒ **Not Applicable**

5. Certificate of Status Desired

☒

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

STRUBLE, WARD S
201 SAN MATEO DR.
BONITA SPRINGS FL 34134

7. Name and Address of New Registered Agent

Name
WARD STRUBLE

Street Address (P.O. Box Number is Not Acceptable)
356 CROMWELL CT.

City
NAPLES

FL

Zip Code
34108

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 **WARD STRUBLE PRESIDENT**

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

(NOTE: Registered Agent signature required when reinstating)

DATE

1/11/02

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so.
(See criteria on back) ☐

FILE NOW!!! FEE IS \$150.00
After May 1, 2002 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS

TITLE	CPT	<input type="checkbox"/> Delete
NAME	STRUBLE, WARD S	
STREET ADDRESS	201 SAN MATEO DR.	
CITY-ST-ZIP	BONITA SPRINGS FL 34134	
TITLE	VCV	<input type="checkbox"/> Delete
NAME	COTNEY, BRYAN T	
STREET ADDRESS	2080 BELL ROAD	
CITY-ST-ZIP	MONTGOMERY AL 36117	
TITLE	S	<input checked="" type="checkbox"/> Delete
NAME	DYAS, ERIC J	
STREET ADDRESS	254 STATE STREET	
CITY-ST-ZIP	MOBILE AL 36603	
TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	ALLRED, GLENDA S	
STREET ADDRESS	8133 LONGNEEDLE PLACE	
CITY-ST-ZIP	MONTGOMERY AL 36603	
TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	MILLER, JOHN C.H. JR.	
STREET ADDRESS	254 STATE STREET	
CITY-ST-ZIP	MOBILE AL 36603	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	SECR.	<input checked="" type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	CATHERINE STRUBLE	
STREET ADDRESS	356 CROMWELL CT	
CITY-ST-ZIP	NAPLES, FL. 34108	
TITLE	DIRECTOR	<input checked="" type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	ROBERT LOWDER	
STREET ADDRESS	2080 BELL RD	
CITY-ST-ZIP	MONTGOMERY AL. 36117	
TITLE	DIRECTOR	<input checked="" type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	CHARLOTTE LOWDER	
STREET ADDRESS	2080 BELL RD.	
CITY-ST-ZIP	MONTGOMERY AL. 36117	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. 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 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address with all other file empowered.

SIGNATURE: **WARD STRUBLE PRES.**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/11/02

Date

(941) 269-5078

Daytime Phone #

CR2E034 (9/01)