2003 FOR PROFIT CORPORATION

UNIFORM BUSINESS REPORT (UBR)

L85344 **DOCUMENT #**

SANIBEL-CAPTIVA AIRPORT SHUTTLE, INC.



FILED Apr 04, 2003 8:00 am Secretary of State

04-04-2003 90116 023 ***150.00

				185				
Principal Place of Business 17305 PINE RIDGE RD #2 FT MYERS BCH FL 33931 US		Mailing Address 17305 PINE RIDGE RD #2 FT MYERS BCH FL 33931 US						
	Place of Business	3. Mailing Address	- 1177,				AN DISH SINI N	18H 8HHI 1881
17284 San Carlos Blvd		17284 San Carlos Blvd.				•		
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			CHECK I	HERE IF MAKING	CHANGES	
#104		#104				12112 11 14114 (1142	OTTALO	
City & State		City & State			4. FEI Number 65-0361	808	1——	oplied For
	Myers Beach, Fl	Ft_ Myers Bea						ot Applicable
Zip	Country	Zip	Country		5. Certificate of Status Des	ired 🔲	\$8.75 Add Fee Require	
33	931 Lee6. Name and Address of Current F	33931	Lee		.7Name and Address of I	low Begistered		:u
The Table of the Party of the P	U. Name and Address of Outperfer.	ogistered Agent	Name			tem.riegiatered	Agont	<u></u>
GALLO, JOSEPH Gallo, Joseph								
17305 PIN	Street Address (P.O. Box Number is Not Acceptable)							
FT MYERS FL 33931				17284 San Carlos Blvd #104				
			City		Miroso Danal	FL	Zip Cod	
8. The above	named entity submits this statement for	the purpose of changing its re	gistered office or r	registered	Myers Beach		13393.	
the obligat	tions of registered agent.	and parpose of snariging here	9.0.0.00 000 0	1091510101	a agent, or both, in the otale	orrionda. ram	arrina with,	and accept
	A. W							þ
SIGNATURE	Signature, typed or printed name of registered agent ar	nd title if applicable (NOTE: B	tegistered Agent signature	re required w	hen reinstation)	DATE		
<u>। वे १</u> ९	ILE NOW!!! FEE IS \$150.00							
Afte			9. Election Campai Trust Fund Contr	· ·		May Be		
10.	c Payable to Florida Department of OFFICERS AND D		11.		ADDITIONS (CHANGES TO	OFFICERO ANE	DIDECTOR	0.00
TITLE	CEOD OFFICERS AND L				ADDITIONS/CHANGES TO	OFFICERS AND		
NAME	GALLO, JOSEPH P	☐ Delete	TITLE NAME	CEO	-		Change	☐ Addition
STREET ADDRESS	17305 S PINE RIDGE RD #2		STREET ADDRESS		lo, Joseph P			
CITY-ST-ZIP	FT MYERS BEACH FL 33931		CITY-ST-ZIP		84 San Carlo		#104	
TITLE	PD	□ Delete	TITLE	-Ft-	- Myers Beach	, FL 3 3	3931 Change	Addition
NAME	GALLO, NANCY	C Delete	NAME	PD	1		≥ Sonango	C1 / ddition
STREET ADDRESS	17305 PINE RIDGE RD #2		STREET ADDRESS	Gal	lo, Nancy		*	
CITY-ST-ZIP	FT MYERS BEACH FL 33931		CITY-ST-ZIP	1/2	84 San Carlo	s Blvd.	#10	4
TITLE	V_ =	Delete	· TITUE•; == **	- I t -	Myers Beach	, FL 33	Change	Addition
NAME	KELLY, GENEVIEVE C		NAME	V K⊝l	lv, Geneviev	· C		
STREET ADDRESS	3506 SW 14TH PLACE		STREET ADDRESS		84 San Carlo			
CITY-ST-ZIP	CAPE CORAL FL 33914	<u>-</u>	CITY-ST-ZIP		Myers Beach		931	
TITLE		☐ Delete	TITLE		2	,	☐ Change	☐ Addition
NAME			NAME					
STREET ADDRESS			STREET ADDRESS					İ
CITY-ST-ZIP		_	CITY-ST-ZIP		- 			
TITLE		☐ Delete	TITLE				☐ Change	Addition
NAME CTREET ADDRESS '			NAME]
STREET ADDRESS CITY-ST-ZIP	•	_	STREET ADDRESS CITY-ST-ZIP					}
TITLE		Delete	TITLE				☐ Change	☐ Addition
STREET ADDRESS			NAME STREET ADDRESS	••	•			
CITY-ST-ZIP		·	CITY-ST-ZIP					
12 bosobi -		nia filima dana anti-mate di di						

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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

4-1-03

Date

239-466-3236

Daytime Phone #