

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 26, 2001 8:00 am
Secretary of State
04-26-2001 90022 038 ****61.25

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DOCUMENT # N00000001183

1. Entity Name

EUROPEAN CHAMBER OF COMMERCE OF SOUTHWEST FLORID

Principal Place of Business

15272 BRIARCREST CIRCLE
FORT MYERS FL 33912

Mailing Address

15272 BRIARCREST CIRCLE
FORT MYERS FL 33912

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

65-0996959

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

SHIPP, THOMAS E JR.
4223 DEL PRADO BLVD
CAPE CORAL FL 33904

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:
FEES 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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP		TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	
	D	DETHLEFSEN, FRANK U	15272 BRIARCREST CIRCLE FORT MYERS FL 33912	☐ Delete					☐ Change ☐ Addition
	D	SCHNEIDER-CHRISTIANS, MICHAEL	15272 BRIARCREST CIRCLE FORT MYERS FL 33912	☐ Delete					☐ Change ☐ Addition
	D	WITTMANN, INGRID	15272 BRIARCREST CIRCLE FORT MYERS FL 33912	☐ Delete					☐ Change ☐ Addition
	D	WITTMANN, WILHELM J	15272 BRIARCREST CIRCLE FORT MYERS FL 33912	☐ Delete					☐ Change ☐ Addition
	D	HEINDL, FRIEDRICH G	15272 BRIARCREST CIRCLE FORT MYERS FL 33912	☐ Delete					☐ Change ☐ Addition
				☐ Delete					☐ Change ☐ 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: *Ingrid Wittmann*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/19/01 941-267-5100
Date Daytime Phone #

CR2E037 (10/00)