

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N00000004791

1. Entity Name

NAWBO OF SOUTHWEST FLORIDA, INC.

FILED

May 29, 2002 8:00 am
Secretary of State

05-29-2002 90718 029 ****61.25

Principal Place of Business

Mailing Address

6450 PINE AVE
SANIBEL FL 33957

4600 C-2 SUMMERLIN RD. #575
FT MYERS FL 33919

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

65-1019315

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

ROBISON, LINDA R
6450 PINE AVE
SANIBEL FL 33957

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: 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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE DP ☐ Delete
NAME ANDERT-SCHMIDT, DARLENE
STREET ADDRESS 4647 SE 17TH PLACE UNIT 304
CITY-ST-ZIP CAPE CORAL FL 33904

TITLE D ☒ Change ☐ Addition
NAME Andert, Darlene
STREET ADDRESS 4647 SE 17th Place Unit 304
CITY-ST-ZIP Cape Coral, FL 33904

TITLE DV ☒ Delete
NAME DOCKMAN, MARY
STREET ADDRESS 689 E ROCKS DRIVE
CITY-ST-ZIP SANIBEL FL 33957

TITLE DP ☐ Change ☒ Addition
NAME Sarah Garrett
STREET ADDRESS 6523 Royal Woods Drive
CITY-ST-ZIP Ft. Myers, FL 33908

TITLE D ☐ Delete
NAME GOODMAN, GINNY
STREET ADDRESS 19267 VINTAGE TRADE CIRCLE
CITY-ST-ZIP FT MYERS FL 33912

TITLE D ☒ Change ☐ Addition
NAME Ginny Goodman
STREET ADDRESS 2110 Aricle Drive Unit 109
CITY-ST-ZIP Naples, FL 34103

TITLE D ☐ Delete
NAME ROBISON, LINDA
STREET ADDRESS 6450 PINE AVE
CITY-ST-ZIP SANIBEL FL 33957

TITLE D ☐ Change ☒ Addition
NAME Sarah Ashton
STREET ADDRESS 654 Sea Oats Drive
CITY-ST-ZIP Sanibel, FL 33957

TITLE D ☒ Delete
NAME MURRAY, KATHI
STREET ADDRESS 10241 METOR PARKWAY, SUITE 112
CITY-ST-ZIP FT MYERS FL 33906

TITLE D ☐ Change ☒ Addition
NAME Paula Kaminski
STREET ADDRESS 1429 Colonial Blvd #103
CITY-ST-ZIP Ft. Myers, FL 33907

TITLE D ☒ Delete
NAME GOBY, SUE A
STREET ADDRESS 800 SEAGATE DR
CITY-ST-ZIP NAPLES FL 34103

TITLE D ☐ Change ☒ Addition
NAME Marietta Neacham
STREET ADDRESS 13141 McGregor Blvd
CITY-ST-ZIP Ft. Myers, FL 33919

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 19.07(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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

5/17/02 (238) 433-0258

Date

Daytime Phone #

CR2E037 (9/01)