

# 2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Feb 21, 2003 8:00 am**  
**Secretary of State**

02-21-2003 90187 036 \*\*\*\*61.25

**DOCUMENT # N01000000702**

1. Entity Name

**RESPECT FOR LAW OPTIMIST CLUB, INC.**



Principal Place of Business

**TIM KURKIMILLIS C/O FMY POLICE  
2210 PECK ST  
FORT MYERS FL 33901**

Mailing Address

**4632 VINCENNES BLVD  
101  
CAPE CORAL FL 33901**

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 **65-1013024**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

**MATTINGLY, BILL  
4632 VINCENNES BLVD.  
SUITE 101  
CAPE CORAL FL 33904**

7. Name and Address of New Registered Agent

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. I am familiar with, and accept the obligations of registered agent.

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  
Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE **PD** ☐ Delete  
NAME **KURKIMILLIS, TIM**  
STREET ADDRESS **2210 PECK ST.**  
CITY-ST-ZIP **FT. MYERS FL 33901**

TITLE **1VP** ☐ Delete  
NAME **NORRIS, JOYCE**  
STREET ADDRESS **27233 JOLLY ROGER LN.**  
CITY-ST-ZIP **FORT MYERS FL 34135**

TITLE **PD** ☐ Delete  
NAME **FELDINALER RUDD, SUSAN**  
STREET ADDRESS **1818 NE 28TH ST**  
CITY-ST-ZIP **CAPE CORAL FL 33909**

TITLE **TD** ☒ Delete  
NAME **NORRIS, WES**  
STREET ADDRESS **27233 JOLLY ROGER LN**  
CITY-ST-ZIP **BONITA SPRINGS FL 34135**

TITLE **2VP** ☒ Delete  
NAME **LANE, MARLIN**  
STREET ADDRESS **2210 PECK ST**  
CITY-ST-ZIP **FORT MYERS FL 33901**

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE **1VP/T** ☒ Change ☐ Addition  
NAME **Lane, Marlin**  
STREET ADDRESS **2210 Peck St**  
CITY-ST-ZIP **Fort Myers, FL 33901**

TITLE **S/D** ☒ Change ☐ Addition  
NAME **Lewis, Lisa**  
STREET ADDRESS **2210 Peck St**  
CITY-ST-ZIP **Fort Myers, FL 33901**

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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: **SIGNATURE REQUIRED Lane**

**2/18/03 (239) 338-2134**

CR2E037 (10/02)