

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

FILED
Apr 23, 2003 8:00 am
Secretary of State

04-23-2003 90298 023 ****61.25

DOCUMENT # N01000001297

1. Entity Name
CAPITAL CONNECTION OF COLLIER COUNTY, INC.



Principal Place of Business

**1100 FIFTH AVE. S.
SUITE 201
NAPLES FL 34102**

Mailing Address

**1100 FIFTH AVE. S.
SUITE 201
NAPLES FL 34102**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number **59-3707756**

Applied For

Not Applicable

Zip

Country

Zip

Country

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

**KRIER, ELINOR V
1100 FIFTH AVENUE SOUTH
SUITE 201
NAPLES FL 34102**

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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE **P** ☐ Delete
NAME **BRUNKER, BUDDY**
STREET ADDRESS **3400 RADIO RD, STE 107**
CITY-ST-ZIP **NAPLES FL 34104**

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

TITLE **V** ☐ Delete
NAME **FLORA, TERRY L**
STREET ADDRESS **3003 TAMiami TRAIL NORTH, STE 400**
CITY-ST-ZIP **NAPLES FL 34103**

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

TITLE **S** ☐ Delete
NAME **CROSS, WALTER J**
STREET ADDRESS **3301 TAMiami TRAIL EAST**
CITY-ST-ZIP **NAPLES FL 34112**

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

TITLE **T** ☐ Delete
NAME **KRIER, ELINOR V**
STREET ADDRESS **1100 FIFTH AVE SOUTH, STE 210**
CITY-ST-ZIP **NAPLES FL 34102**

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

TITLE **D** ☐ Delete
NAME **CONRECODE, THOMAS E**
STREET ADDRESS **3003 TAMiami TRAIL NORTH, STE 400**
CITY-ST-ZIP **NAPLES FL 34103**

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

TITLE **D** ☐ Delete
NAME **MOHLKE, GEORGE**
STREET ADDRESS **P O BOX 2313**
CITY-ST-ZIP **NAPLE FL 34106**

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:

Walter Cross

Secretary J. Walter Cross 4/21/03 239-732-2725

CR2E037 (10/02)

90102378

Attachment

Capital Connection of Collier County, Inc.

2003 Uniform Business Report

Document #N01000001297

#11 Additional Names

D

STEPHENS, JACKIE
1034 SIXTH AVENUE NORTH
NAPLES, FL 34102

D

WATKINS, HENRY B. III
649 FIFTH AVENUE SOUTH
NAPLES, FL 34102