

2001 UNIFORM BUSINESS REPORT (UBR)

FILED

Jan 30, 2001 8:00 am
Secretary of State

01-30-2001 90179 050 ****61.25

DOCUMENT # N01793

1. Entity Name

OPTIMIST CLUB OF CAPE CORAL, INC.

Principal Place of Business

1714 CAPE CORAL PARKWAY
CAPE CORAL FL 33904

Mailing Address

PO BOX 101556
CAPE CORAL FL 33910
US

00010143



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

23-7093958

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

STURM, EDITH
2115 SE 25TH LANE
CAPE CORAL FL 33904

Name

ROGER WILLIAMS

Street Address (P.O. Box Number is Not Acceptable)

2528 SE 43rd Lane

City

CAPE CORAL

FL

Zip Code

33904

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

Roger Williams

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 VP
NAME KROGULSKI, JOHN
STREET ADDRESS 1428 NE 5TH TERR.
CITY-ST-ZIP CAPE CORAL FL 33909 ☒ Delete

TITLE VP
NAME HARRY SALZMAN
STREET ADDRESS 5306 SKYLINE BLVD
CITY-ST-ZIP CAPE CORAL FL 33914 ☒ Change ☐ Addition

TITLE D
NAME STURM, CLAUDE
STREET ADDRESS 2115 SE 26TH AVE.
CITY-ST-ZIP CAPE CORAL FL 33904 ☐ Delete

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

TITLE ST
NAME SALMAN, HARRY
STREET ADDRESS 5306 SKYLINE BLVD
CITY-ST-ZIP CAPE CORAL FL 33914 ☒ Delete

TITLE ST EDITH STURM
NAME
STREET ADDRESS 2115 SE 25th
CITY-ST-ZIP CAPE CORAL FL 33904 ☒ Change ☐ Addition

TITLE D
NAME KOHL, PAUL
STREET ADDRESS 3720 SE 17TH PLACE
CITY-ST-ZIP CAPE CORAL FL ☐ Delete

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

TITLE D
NAME HEINRICH, GEORGE
STREET ADDRESS 2526 20th AVE SE
CITY-ST-ZIP CAPE CORAL FL 33904 ☒ Delete

TITLE VP HEINRICH, GEORGE
NAME
STREET ADDRESS 2526 20th Ave SE
CITY-ST-ZIP CAPE CORAL FL 33904 ☐ Change ☒ Addition

TITLE D
NAME DELORENZO, GEORGE
STREET ADDRESS 240 SE 6TH STREET
CITY-ST-ZIP CAPE CORAL FL 33990 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ 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:

Edith Sturm
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1.17.00

941 574 8287

Date

Daytime Phone #

CR2E037 (10/00)