

2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# N02000000005

FILED
Mar 02, 2003
Secretary of State

Entity Name: CITIZENS FOR THE CAPE CORAL FIREFIGHTER'S MEMORIAL, INC.

Current Principal Place of Business:

1039 S.E. 9TH PLACE
SUITE 235
CAPE CORAL, FL 339903098

New Principal Place of Business:

Current Mailing Address:

1039 S.E. 9TH PLACE
SUITE 235
CAPE CORAL, FL 339903098

New Mailing Address:

FEI Number: 01-0663510

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GUTHRIE, JERRY R
323 W.E. 25TH TERRACE
CAPE CORAL, FL 33904 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: BOD () Delete
Name: HASTON, JEFF
Address: 802 SW 15TH AVE
City-St-Zip: CAPE CORAL, FL 33990

Title: BOD () Delete
Name: GARGIULA, MICHAEL
Address: 3917 HIDDEN ACRES
City-St-Zip: NORTH FORT MYERS, FL 33903

Title: TRES () Delete
Name: IWANIEC, ROBERT
Address: 410 SE 18TH TER
City-St-Zip: CAPE CORAL, FL 33990

Title: PRES () Delete
Name: GUTHRIE, JERRY R
Address: 323 SE 25TH TER
City-St-Zip: CAPE CORAL, FL 33990

Title: VP () Delete
Name: HAMMERL-LESTER, MARY KAY
Address: 11270 ROYAL TEE CIRCLE
City-St-Zip: CAPE CORAL, FL 33991

Title: SEC () Delete
Name: PIWOWAR, LAUREN E
Address: 1121 SE 6TH TER
City-St-Zip: CAPE CORAL, FL 33990

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
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Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: LAUREN E PIWOWAR

SEC

03/02/2003

Electronic Signature of Signing Officer or Director

Date

AMY HASTON - BOD
802 SW 15TH AVE
CAPE CORAL, FL 33991