

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

FILED
Apr 04, 2003 8:00 am
Secretary of State

04-04-2003 90129 033 ****61.25

DOCUMENT # N02000000987

1. Entity Name
GULF COAST INVITATIONAL, INC.



Principal Place of Business
1520 ROYAL PALM SQUARE BLVD., SUITE 320
FORT MYERS FL 33919

Mailing Address
1520 ROYAL PALM SQUARE BLVD., SUITE 320
FORT MYERS FL 33919

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

80-0038525

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

KYLE, KEVIN A
1520 ROYAL PALM SQUARE BLVD., SUITE 320
FORT MYERS FL 33919

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	President & Director	<input type="checkbox"/> Delete
NAME	Jeffrey C. Campbell	
STREET ADDRESS	1209 Sunbury Dr.	
CITY-ST-ZIP	Pt. Myers, FL 33901	
TITLE	Vice President & Director	<input type="checkbox"/> Delete
NAME	Robert C. HARKETT	
STREET ADDRESS	8457 Cypress Preserve Place	
CITY-ST-ZIP	Fort Myers, FL 33912	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	Bo. Treasurer & Director	<input type="checkbox"/> Delete
NAME	Kevin A. Kyle	
STREET ADDRESS	5612 Sonnen Ct.	
CITY-ST-ZIP	Pt. Myers, FL 33919	
TITLE	Secretary & Director	<input type="checkbox"/> Delete
NAME	Richard Welch	
STREET ADDRESS	11248 Lakeland Cir.	
CITY-ST-ZIP	Pt. Myers, FL 33913	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
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STREET ADDRESS		
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CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

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: Kevin A. Kyle Treasurer 4/1/03

239-936-7200

CR2E037 (10/02)