**FILED** 

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

## Mar 07, 2003 8:00 am § Secretary of State **DOCUMENT # N02186** 1. Entity Name 03-07-2003 90121 017 \*\*\*\*61.25 SHORES NEIGHBORHOOD WATCH, INC. Principal Place of Business Mailing Address 9200 BONITA BEACH RD 9200 BONITA BEACH RD **BONITA SPRINGS FL 34135** BONITA SPRINGS FL 34135 US 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. ☐ CHECK HERE IF MAKING CHANGES City & State City & State 4. FEI Number 65-0026775 Applied For Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent JOHN D. SPEAR Street Address (P.O. Box Number is Not Acceptable) 9200 BONITA BEACH RD, SUITE 204 PO BOX 2207 **BONITA SPRINGS FL 34135** City 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 (NOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing Make Check Payable to FILE NOW: FEE IS \$61.25 **\$5.00** May Be Trust Fund Contribution. Added to Fees Florida Department of State 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 11. TITLE DT ☐ Delete TITLE ☐ Change ☐ Addition STOCKSDALE, MARY BETH NAME NAME STREET ADDRESS 226 3RD ST STREET ADDRESS CITY-ST-ZIP **BONITA SPRINGS FL 34134** CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME ALMEIDA, WILLIAM NAME STREET ADDRESS 119 4TH ST STREET ADDRESS CITY-ST-ZIP BONITA SPRINGS FL CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition MCPHERSON, MICHAEL NAME NAME STREET ADDRESS 174 3RD STREET STREET ADDRESS CITY-ST-ZIP **BONITA SPRINGS FL 34134** CITY-ST-ZIP TITLE ☐ Delete TITLE □ Change ☐ Addition NAME SCHWARTZ, BOB NAME STREET ADDRESS 88 9 ST STREET ADDRESS CITY-ST-ZIP **BONITA SPRINGS FL 34134** CITY-ST-ZIP Delete TITLE TITLE Change Change ☐ Addition NAME KALISIK, RANDY NAME 508 W VALLEY DR STREET ADDRESS STREET ADDRESS CITY-ST-ZIP **BONITA SPRINGS FL 34134** CITY-ST-ZIP Delete TITLE ☐ Change ☐ Addition OLEARY, MATT NAME NAME STREET ADDRESS 141 3RD ST STREET ADDRESS

12. I hereby certify that the information supplied with this filling 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.

CITY-ST-ZIP

**BONITA SPRINGS FL 34134** 

SIGNATURE