

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 31, 2001 8:00 am
Secretary of State

01-31-2001 90281 017 ****61.25

DOCUMENT # N06577

1. Entity Name

GERMAN AMERICAN CLUB "FRIENDSHIP" OF BONITA SPRING

Principal Place of Business

% GUNTHER GLASER
 199 OAKWOOD DR
 NAPLES FL 33942
 US

Mailing Address

% GUNTHER GLASER
 199 OAKWOOD DR
 NAPLES FL 33942
 US

910134



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

59-2607715

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

GLASER, GUNTHER
 199 OAKWOOD DR
 NAPLES FL 33942

7. Name and Address of New Registered Agent

Name **MATT STEFAN**

Street Address (P.O. Box Number is Not Acceptable) **25810 HICKORY BLVD.**

SEA SCAPE BLDG. E 501

City **BONITA SPRINGS**

FL

Zip Code **34134**

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

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

TITLE **PD** ☐ Delete
 NAME **KRECH, KARL**
 STREET ADDRESS **25637 RED BLUSH CIR**
 CITY-ST-ZIP **BONITA SPRINGS FL**

TITLE **VD** ☒ Delete
 NAME **BECHOLD, ELFRIEDA**
 STREET ADDRESS **64 4TH ST SW**
 CITY-ST-ZIP **BONITA SPRINGS FL**

TITLE **TD** ☒ Delete
 NAME **GLASER, GUNTHER**
 STREET ADDRESS **199 OAKWOOD DR**
 CITY-ST-ZIP **NAPLES FL**

TITLE **SD** ☐ Delete
 NAME **LINGNER, LORRAINE**
 STREET ADDRESS **9300 BARON RD**
 CITY-ST-ZIP **BONITA SPRINGS FL**

TITLE **TREAS.** ☐ Delete
 NAME **MATT STEFAN**
 STREET ADDRESS **25810 - HICKORY BLVD**
 CITY-ST-ZIP **SEA-SCAPE BLDG. E 501**
BONITA SPRINGS, FL. 34134

TITLE **V. Pres.** ☐ Delete
 NAME **BARBARA, STEFAN**
 STREET ADDRESS **25810 - HICKORY BLVD.**
 CITY-ST-ZIP **SEA-SCAPE BLDG. E 501**
BONITA SPRINGS, FL. 34134

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

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

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

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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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (10/00)