

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

**FILED**  
**Feb 26, 2003 8:00 am**  
**Secretary of State**

02-26-2003 90183 041 \*\*\*\*61.25

**DOCUMENT # N27098**

1. Entity Name

**EXXONMOBIL RETIREE CLUB OF SOUTHWEST FLORIDA, INC.**



Principal Place of Business

**3213 GOLFSIDE DRIVE  
NAPLES FL 34110  
US**

Mailing Address

**3213 GOLFSIDE DRIVE  
NAPLES FL 34110  
US**

2. Principal Place of Business

**3213 GOLFSIDE DRIVE**

3. Mailing Address

**3213 GOLFSIDE DRIVE**

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

**NAPLES, FL**

City & State

**NAPLES, FL**

Zip

**34110**

Country

**USA**

Zip

**34110**

Country

**USA**

4. FEI Number **65-0133137**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

**NUBER, KENNETH J  
3213 GOLFSIDE DRIVE  
NAPLES FL 34110**

7. Name and Address of New Registered Agent

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 NAME STREET ADDRESS CITY-ST-ZIP	PD NUBER, KENNETH J 3213 GOLFSIDE DRIVE NAPLES FL 34110	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D DICKINSON, ROBERT M 179 PURUS STREET PORT CHARLOTTE FL 33983	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD CALIFANO, PAULINE 4525 COUNTRY CLUB BLVD., #108 CAPE CORAL FL 33904	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD LAMBERT, DOROTHY 140 LAS PALMAS N FT MYERS FL	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D CARMODY, THOMAS 5371 COLONADE CT CAPE CORAL FL	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D THOMAS, C. ROBERT 20231 CALICE CT., #2704 ESTERO FL 33928	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> 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:

**KENNETH J. NUBER**

**KENNETH J NUBER 2/23/03 941-591-2471**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E037 (10/02)

attachment

70221210

**2003 NOT-FOR-PROFIT CORPORATION N27098**  
**UNIFORM BUSINESS REPORT (UBR)**

**EXXONMOBIL RETIREE CLUB OF SOUTHWEST FLORIDA, INC.**

**DOCUMENT # N27098**

**ATTACHMENT TO BLOCK 10-OFFICERS AND DIRECTORS**

**D**

**HIGGINS, EDWARD**  
**13411 BRIDGEMORE AVE.**  
**BONITA SPRINGS, FL 34135**

**D**

**LANG, HENRY**  
**2854 SANCHO PANZA COURT**  
**PUNTA GORDA, FL 33950**

**TD**

**HAMMERBACHER, JOHN A. JR.**  
**1629 SUZI STREET**  
**PUNTA GORDA, FL 33950**

**D**

**RUSH, ARLENE**  
**383 HARBOR DRIVE APT. 109**  
**NAPLES, FL 34103**

**D**

**BULL, WALLACE K.**  
**23740 EDDYSTONE RD. # 103**  
**BONITA SPRINGS, FL 34135**