1								
200	UNIFORM BUSI	NESS REPOR	RT (UBI	R) .	• \$1			3346
DÓCU	MENT # N4073 7.		FILED	TATE		8		
1. Entity Name				S	SECRETARY OF STATE TALL AHASSEE, FLORIDA			
CAPE C	CORAL COUNCIL FOR ARTS 8	k HUMANITIES, INCOR	P					
D	- 40	Matter Address			I SEP 17 PM	1: 54		
Principal Plac	`	Mailing Address P.O. BOX 151017						
	L PARK BLVD.	CAPE CORAL FL 33909		1 (88(118) 8() 8	:Rij Griji 18482 sijii :BGI 8:ESI B	1911 BLBH B1811 B18	11 519 15 1 89 5	
	Place of Business	3. Mailing Address						
	Cultur al Park Blud		15101	7	1017 00111 12000 14117 7001 01011 0			
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		01/26/00	DO NOT WRITE IN THIS	\$P *25		
City & Stat	<i>—</i>	City & State	CAL S	4 EEI Number	55-0139543		Applicable	
Zip	Country	Zip 2	Country	5. Certificate of St	atus Desired	\$8.75 Addit	tional	:
33	6. Name and Address of Current F	33909	USA		ress of New Registered	Fee Required		l l
	t. Name and Address of Current F	negistered Agent	Name	المام ملاء	0	C		i
ADAMSKI	DOREDT C		Street A	ddress (P.O. Box Number is I	Not Acceptable)	<u> </u>		l)
ADAMSKI, ROBERT C. 1714 CAPE CORAL PKWY					<u> </u>	04.		i
CAPE CORAL FL 33904			/ City	1714 CAPI	COLAC	PRUG		i
			City	ape Corac	FL	Zip Code	704	
8. The above	named entity submits this statement for	the purpose of changing its re	egistered office o	r registered agent, or both, in	the state of Florida.			
SIGNATURE,							}	ı
	Signature, typed or printed name of registered agent a	nd title if applicable. (NOTE: F	Registered Agent signat	ture required when reinstating)	DATE			i
	FILE NOW: FEE IS \$61.25	\$5.00 May Be	Make Chec	k Payable to		ı		
	ember 12, 2001, min. will be \$23	9. Election Camp Trust Fund Co		Added to Fees		ent of State		l l
10.	OFFICERS AND DIR	FCTORS	11.	ADDITIONS/CHANG	ES TO OFFICERS AND D	RECTORS IN	10	l)
TITLE	CD	☐ Delete	TITLE	VCD		☐ Change		9
NAME	SOMMERFIELD, JUNE		NAME		artoff			CR2E037 (5/01)
STREET ADDRESS CITY-ST-ZIP	106 N.E. 21 AVENUE CAPE CORAL FL 33909		STREET ADDRESS CITY-ST-ZIP	4204 Countre			37	E03
TITLE	VCD	₩ Delete	TITLE	ALD	-1 - 331	☐ Change	Addition	CR
NAME	CIMMINO, N. FRANCIS		NAME	KAY WINNE	*L			ı
STREET ADDRESS CITY-ST-ZIP	4127 PALM TREE BLVD. CAPE CORAL FL 33904		STREET ADDRESS CITY-ST-ZIP	167,20 23,	of.	1-7126	-	ı
TITLE	ACD	™ Delete	TITLE SCI	Cape CorAL Gloria LA	FL 33914	☐ Change	Addition	i
NAMÉ	MERTON, SIROTA	Delete	NAME			الله ماني ب		l
STREET ADDRESS	226 S.W. 38TH STREET		STREET ADDRESS	4936 Vice	eroy St2			ı
CITY-ST-ZIP	CAPE CORAL FL 33914		CITY-ST-ZIP	CAPELOIA	L, FL 3390			
TITLE NAME	KERSEY, THERESA	☐ Delete	TITLE NAME			☐ Change	☐ Addition	l
STREET ADDRESS	2918 N.W. 19TH TERRACE		STREET ADDRESS					l
CiTY-ST-ZIP	CAPE CORAL FL 33909		CITY-ST-ZIP					i
TITLE	SCD MADAIKA LEGIJ	☐ Delete	TITLE		١	☐ Change	Addition	
NAME STREET ADDRESS	Madaika, Lesli 4120 S.W. 9th Avenue		NAME STREET ADDRESS					ı
CITY-ST-ZIP	CAPE CORAL FL 33914		CITY-ST-ZIP					
TITLE	TD	☐ Delete	TITLE			☐ Change	Addition	ì
NAME STREET ADDRESS	KMETZ, MARIANNE 1326 S.W. 4TH COURT		NAME STREET ADDRESS			92		i
PINEL MODILESS	10£0 0.77. 4111 UUUN1		OTHER ADDRESS	Ī		SP		

CITY-ST-ZIP

9/10/01

941-772-1456

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.

MOSTURE BENIESED &

CAPE CORAL FL 33991

CITY-ST-ZIP

September 7, 2001

Cultural Park Theatre 528 Cultural Park Blvd. Cape Coral, Florida 33909 US

Dear Sir/Madam:

There was an overpayment on our account which was acknowledged and verified last year. I called on September 5 and again was told there were 2 payments made for the same year. I was advised to file for this year which I have done on line via sunbiz.org and I am sending this letter and copy of the filing should there be any question as to why there was no payment made at this time.

I will assume our status is fine and the overpayment has been applied to this year. If there is a question or you need to contact me on this matter you may do so at the address, phone or email below.

Sincerely,

Marianne Kmetz 1326 SW 4th Ct.

Cape Coral, FL 33991

Phone: 941-772-1456

Email: marianne.kmetz@marsh.com