

2001 UNIFORM BUSINESS REPORT (UBR)**FILED**
Feb 28, 2001 8:00 am
Secretary of State

02-28-2001 90058 019 *****61.25

DOCUMENT # N43707

1. Entity Name

THE BONITA SPRINGS AREA CHAMBER OF COMMERCE FOUN

Principal Place of Business

25071 CHAMBER OF COMMERCE DR
BONITA SPRINGS FL 33923

Mailing Address

25071 CHAMBER OF COMMERCE DRIVE
BONITA SPRINGS FL 34135
US

2. Principal Place of Business

25071 Chamber of Commerce Dr.

3. Mailing Address

Suite, Apt. #, etc.

City & State

Bonita Springs FL.

City & State

Zip

34135

Country

Lee

Country

4. FEI Number

65-0266046

Applied For

Not Applicable

5. Certificate of Status Desired ☐**\$8.75** Additional
Fee Required

6. Name and Address of Current Registered Agent

KEEPER, NANCY P
25071 CHAMBER OF COMMERCE DR
BONITA SPRINGS FL 34135

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.

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 \$61.259. 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 **D** ☐ Delete
NAME **BARBER, FREDERICK**
STREET ADDRESS **7400 TAMiami TRAIL N STE 200**
CITY-ST-ZIP **NAPLES FL 34108**TITLE **P** ☐ Delete
NAME **LEPOLA, R.A.**
STREET ADDRESS **3620 LAKEMONT DR**
CITY-ST-ZIP **BONITA SPRINGS FL 34134**TITLE **D** ☐ Delete
NAME **HELBING, VICKIE**
STREET ADDRESS **16565 VANDERBILT DR**
CITY-ST-ZIP **BONITA SPRGS FL 34134**TITLE **S** ☐ Delete
NAME **SPEAR, JOHN D ESQ**
STREET ADDRESS **9200 BONITA BEACH RD STE 204**
CITY-ST-ZIP **BONITA SPRINGS FL 34135**TITLE **D** ☒ Delete
NAME **HOCHSTETLER, HENRY**
STREET ADDRESS **3940 BONITA BEACH RD**
CITY-ST-ZIP **BONITA SPRINGS FL 33923**TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☒ Change ☒ Addition
NAME **Richard GARNER**
STREET ADDRESS **9021 Bonita Beach Rd**
CITY-ST-ZIP **Bonita Springs FL 34135** **Director**

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)