

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N45256

1. Entity Name

COLLIER SPORTSMEN & CONSERVATION CLUB, INC.

FILED
Apr 08, 2002 8:00 am
Secretary of State

04-08-2002 90204 037 ****61.25

0085106

Principal Place of Business

2500 JENKINS WAY
NAPLES FL 34117
US

Mailing Address

2500 JENKINS WAY
NAPLES FL 34117
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

65-0307902

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

DO NOT WRITE IN THIS SPACE



6. Name and Address of Current Registered Agent

JENKINS, WAYNE
2500 JENKINS WAY
NAPLES FL 34117

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 \$61.25

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
NAME JENKINS, WAYNE
STREET ADDRESS 2500 JENKINS WAY
CITY-ST-ZIP NAPLES FL 34117 ☐ Delete

TITLE SD
NAME CHRZANOSKI, STANLEY
STREET ADDRESS 1716 46TH STREET SW
CITY-ST-ZIP NAPLES FL 34116 ☐ Delete

TITLE D
NAME DINUNZIO, JOHN
STREET ADDRESS 1276 29TH ST SW
CITY-ST-ZIP NAPLES FL 34117 ☒ Delete

TITLE TD
NAME HUGHES, DARYL
STREET ADDRESS 520 27TH ST. N.W.
CITY-ST-ZIP NAPLES FL 34120 ☒ Delete

TITLE DR
NAME SMITH, DAVID RONALD
STREET ADDRESS 540 23RD ST. S.W.
CITY-ST-ZIP NAPLES FL 34117 ☐ Delete

TITLE D
NAME MILLER, LESTER
STREET ADDRESS 590 4TH ST. S.E.
CITY-ST-ZIP NAPLES FL 34117 ☒ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

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

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

TITLE VP
NAME MIKE SORRELL
STREET ADDRESS 1010 15th ST. S.W.
CITY-ST-ZIP NAPLES, FL. 34117 ☐ Change ☒ Addition

TITLE TD
NAME MANUEL SANDOVAL
STREET ADDRESS 175 19th ST. S.W.
CITY-ST-ZIP NAPLES, FL. 34117 ☐ Change ☒ Addition

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

TITLE D
NAME GENE DARST
STREET ADDRESS 2379 ANDREW DR. S.
CITY-ST-ZIP NAPLES, FL. 34112 ☐ Change ☒ 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:

Wayne Jenkins REQUIRED WAYNE JENKINS

APR 28, 2002 (941) 455-8109

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (9/01)