

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N51236

1. Entity Name

CAPE CORAL OPTIMIST FOUNDATION, INC.

FILED
Jan 21, 2000 8:00 am
Secretary of State

01-21-2000 90112 021 ****61.25

Principal Place of Business
3501 DEL PRADO BLVD
#204
CAPE CORAL FL 33904
US

Mailing Address
2832 18TH AVE
CAPE CORAL FL 33904-4008
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

5306 Skyline Blvd.
Cape Coral FL
33914 USA



DO NOT WRITE IN THIS SPACE

4. FEI Number

23-7093952

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

DELORENZO, FRANK
240 SE 6TH ST
CAPE CORAL FL 33990

Name

Joseph Valente

Street Address (P.O. Box Number is Not Acceptable)

207 SE 18th Ave

City

Cape Coral

FL

Zip Code

33904

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 Joseph G. Valente

Joseph Valente

January 13, 2000

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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

ST
SALZMAN, HARRY
5306 SKYLINE BLVD.
CAPE CORAL FL

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

D
VELENTE, JOSEPH
207 S.E. 43RD LANE
CAPE CORAL FL

☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

D
Edith Sturm
2115 SE 25th Lane
Cape Coral FL 33904

☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

D
KOHL, PAUL
3720 SE 17TH PL
CAPE CORAL FL 33904

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

P
POVISIL, JOSEPH
2832 S.E. 18TH AVE.
CAPE CORAL FL

☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

D
Frank Dehorenzo
240 SE 6th ST
Cape Coral FL 33990

☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

D
STURM, E. CLAUDE
2115 S.E. 25TH LANE
CAPE CORAL FL

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

D
Roger Williams
2620 SE 20th place
Cape Coral FL 33904

☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ 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:

Harry B Salzman
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

Jan. 13, 2000 (941) 945-2300

CR2E037 (9/99)