

# 2001 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Jan 26, 2001 8:00 am**  
**Secretary of State**

01-26-2001 90076 020 \*\*\*\*70.00

**DOCUMENT # N51321**

1. Entity Name

**G.A.S.C. SCHUETZENVEREIN INC.**

Principal Place of Business

2101 SW PINE ISLAND RD  
P O BOX 1139  
CAPE CORAL FL 33910  
US

Mailing Address

1224 S.W. 53 TERR  
CAPE CORAL FL 33914  
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

**65-0371744**

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

**BARTLETT, JOAN**  
**1224 S.W. 53 TERR**  
**CAPE CORAL FL 33914**

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

T ☐ Delete  
**BARTLETT, JOAN**  
**1224 S.W. 53 TERR**  
**CAPE CORAL FL 33914**

~~DIRECTOR~~ ☐ Delete **CHANGE**  
**VOGT, KERAL**  
**4837 S.W. 23 AVE**  
**CAPE CORAL FL 33914**

D ☒ Delete  
**WINTER, LOTTE**  
**1133 SE 32 TER**  
**CAPE CORAL FL 33904**

D ☒ Delete  
**BAAS, GERDA**  
**1727 SE 41 ST**  
**CAPE CORAL FL**

VP ☒ Delete  
**BACHER, THEURETZ HEINZ**  
**1118 SW 48TH TERR, #202**  
**CAPE CORAL FL 33914**

☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

☐ Change ☒ Addition  
**PRESIDENT**  
**BILL DIERINGER**  
**1953 SE 34<sup>th</sup> TERRACE**  
**CAPE CORAL, FL. 33904**

☐ Change ☒ Addition  
**VICE PRESIDENT**  
**HARRY KRUSE**  
**126 CULTURAL PARK BLVD. N.**  
**CAPE CORAL, FL. 33909**

☐ Change ☒ Addition  
**SECRETARY**  
**JEANNE SCHWICKE**  
**4643 FOREST GLEN DR.**  
**FT. MYERS, FL. 33903**

☐ Change ☒ Addition  
**DIRECTOR**  
**MARIANNE MAETZKE**  
**4509 ORCHID BLVD.**  
**CAPE CORAL, FL. 33904**

☐ Change ☒ Addition  
**DIRECTOR**  
**ANTJE TREBING**  
**12470 PANASOFFKEE DRIVE**  
**N. FT. MYERS, FL. 33903**

☐ Change ☒ Addition  
**DIRECTOR**  
**LINDA WIEDEMANN**  
**309 CAPE CORAL PARKWAY W 205**  
**CAPE CORAL, FL. 33914**

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:

*Joan Bartlett* **Retired Treasurer**

**1/5/01 941-549-4982**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date Daytime Phone #

CR2E037 (10/00)