

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Aug 17, 2001 8:00 am
Secretary of State

0013537

DOCUMENT # N93000004839

1. Entity Name

UNIVERSITY OF ILLINOIS ALUMNI CLUB OF SOUTHWEST

08-17-2001 90003 033 ****61.25

Principal Place of Business

C/O BARBARA PURCELL
 1575 FOREST NELSON BLVD
 PORT CHARLOTTE FL 33952
 US

Mailing Address

C/O BARBARA PURCELL
 1575 FOREST NELSON BLVD
 PORT CHARLOTTE FL 33952
 US

A0081768



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

Martha J. Ward

3. Mailing Address

Martha J. Ward

Suite, Apt. #, etc.

114 SW 58th Street

Suite, Apt. #, etc.

114 SW 58th Street

City & State

Cape Coral, Florida

City & State

Cape Coral, Florida

4. FEI Number

65-0448471

Applied For

Not Applicable

Zip

33914

Country

Lee

Zip

33914

Country

Lee

5. Certificate of Status Desired ☐

\$8.75 Additional
 Fee Required.

6. Name and Address of Current Registered Agent

TABLER, KEN
1211 BROADWATER DRIVE
FORT MYERS FL 33919

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

Ken Tabler President

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

Aug 20, 2001

DATE

FILE NOW: FEE IS \$61.25

After September 12, 2001, min. will be \$236.25

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	P	<input checked="" type="checkbox"/> Delete
NAME	FAIRBAIRD, JAMES	
STREET ADDRESS	1564 COVINGTON CIR E	
CITY-ST-ZIP	FORT MYERS FL 33919	
TITLE	VP	<input checked="" type="checkbox"/> Delete
NAME	CRAWFORD, GEORGE	
STREET ADDRESS	13317 TALL GRASS CT. SE	
CITY-ST-ZIP	FT MYERS FL	
TITLE	S	<input type="checkbox"/> Delete
NAME	BEARDEN, LAMOYNE	
STREET ADDRESS	1010 SW 16TH TERRACE	
CITY-ST-ZIP	CAPE CORAL FL	
TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	SMITH, BETTY	
STREET ADDRESS	8413 CREEKVIEW LN	
CITY-ST-ZIP	ENGLEWOOD FL 34224	
TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	TABAKA, JAMES	
STREET ADDRESS	10707 EVERGLADES KITE CIRCLE	
CITY-ST-ZIP	ESTERO FL	
TITLE	D	<input type="checkbox"/> Delete
NAME	WARD, MARTHA J	
STREET ADDRESS	114 SW 58TH ST	
CITY-ST-ZIP	CAPE CORAL FL	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	P	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Tabler, Kenneth A.	
STREET ADDRESS	1211 Broadwater Drive	
CITY-ST-ZIP	Ft. Myers, Fl. 33919	
TITLE	VP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Reher, John F.	
STREET ADDRESS	11975 King James Court	
CITY-ST-ZIP	Cape Coral, Fl 33991	
TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Turk, Lucian L.	
STREET ADDRESS	10100 Cypress Cove Dr. #242	
CITY-ST-ZIP	Ft. Myers, Fl 33908	
TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Wilner, William D.	
STREET ADDRESS	3010 SE 16th Place	
CITY-ST-ZIP	Cape Coral, Fl 33904	
TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Krejci, George M.	
STREET ADDRESS	4423 SE 20th Place	
CITY-ST-ZIP	Cape Coral, Fl 33904	
TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Parker, Josephine	
STREET ADDRESS	5713 Foxlake Drive	
CITY-ST-ZIP	N. Ft. Myers, Fl 33917	

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(l), 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:

Kenneth A. Tabler Kenneth A. Tabler

8/20/2001

944-489-0507

CR2E037 (5/01)