

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N93000005643

1. Entity Name

CHARLOTTE COUNTY FOUNDATION, INC.

FILED
Mar 06, 2002 8:00 am
Secretary of State

03-06-2002 90135 034 ****61.25

Principal Place of Business

639 E. HARGREAVES AVE.
PUNTA GORDA FL 33950
US

Mailing Address

639 E. HARGREAVES AVE.
PUNTA GORDA FL 33950
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 65-0455319

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

WOTITZKY, LEO
223 TAYLOR ST.
SUITE 301
PUNTA GORDA FL 33950

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

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MIZELL, JOHN ESQ 223 TAYLOR ST PUNTA GORDA FL 33950	☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MUELKE, LEONARD 1 COLONY POINT DRIVE #10-B PUNTA GORDA FL	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D PRICE, JACK L 1000 ALBATROSS DR PUNTA GORDA FL	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD BARBEE, BRENDA 11370 SW COURTNEY DR. LAKE SUZY FL 34266	☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD WOTITZKY, LEO 4518 NORTH SHORE DRIVE CHARLOTTE HARBOR FL 33980	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VCD PEEPLER, VERNON 3818 CARUPANO CT. PUNTA GORDA FL	☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD MICHAEL HORNER 222 NESBIT STREET PUNTA GORDA, FL 33950	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD 343 MADRID BLVD. PUNTA GORDA, FL 33950	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D JUDI BEAUMONT 18501 MURDOCK CIRCLE PORT CHARLOTTE, FL 33948	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MELANIE HIGH, ESQ. 223 TAYLOR STREET PUNTA GORDA, FL 33950	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D JOSHUA PUTTER 809 E. MARION AVENUE PUNTA GORDA, FL 33950	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☒ Change ☐ Addition 625 W. OLYMPIA AVENUE PUNTA GORDA, FL 33950	

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 #

CR2EN37 (9/01)