

2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
May 14, 2003 8:00 am
Secretary of State

05-14-2003 90136 019 *****61.25

DOCUMENT # N94000001876

1. Entity Name

COMMUNITY RESOURCE CENTER OF PUNTA GORDA, INC.



Principal Place of Business

**125 CHARLOTTE AVE E
PUNTA GORDA FL 33950
US**

Mailing Address

**P.O. BOX 1573
PUNTA GORDA FL 33951
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 **65-0496363**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

☐ CHECK HERE IF MAKING CHANGES



6. Name and Address of Current Registered Agent

**WYNN, JUANITA W
1271 RIO DE JANEIRO AVE.
PUNTA GORDA FL 33983**

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. I am familiar with, and accept the obligations of registered agent.

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
Florida Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	DVP	☒ Delete
NAME	FREDERICK, ANNIE L	
STREET ADDRESS	1616 CHARLANA ST	
CITY-ST-ZIP	PUNTA GORDA FL 33950	
TITLE	DT	☒ Delete
NAME	NEAL, ROBERT JR	
STREET ADDRESS	HARRISON CIRCLE #2	
CITY-ST-ZIP	PUNTA GORDA FL 33950	
TITLE	DS	☒ Delete
NAME	GREEN, CORNELL C	
STREET ADDRESS	111 REVERE ST.	
CITY-ST-ZIP	PORT CHARLOTTE FL 33952	
TITLE	DP	☐ Delete
NAME	WYNN, JUANITA S	
STREET ADDRESS	1271 RIO DE JANEIRO	
CITY-ST-ZIP	PUNTA GORDA FL 33983	
TITLE	D	☒ Delete
NAME	REID, RENELLA	
STREET ADDRESS	176 ORGAN ST	
CITY-ST-ZIP	PUNTA GORDA FL	
TITLE	D	☐ Delete
NAME	WEAVER, ALMA	
STREET ADDRESS	221 21ST PL SE	
CITY-ST-ZIP	CAPE CORAL FL	

TITLE	DVP	☒ Change ☐ Addition
NAME	Rev. Gary Suber	
STREET ADDRESS	Broadbranch	
CITY-ST-ZIP	Port Charlotte, FL 33948	
TITLE	DT	☒ Change ☐ Addition
NAME	Brenda Clark	
STREET ADDRESS	22187 Breeze swept Ave.	
CITY-ST-ZIP	Port Charlotte, FL 33952	
TITLE	DS	☒ Change ☐ Addition
NAME	Jennifer Reinbold	
STREET ADDRESS	23161 Mc Burvey	
CITY-ST-ZIP	Port Charlotte, FL 33980	
TITLE	D	☐ Change ☒ Addition
NAME	James Heckman	
STREET ADDRESS	570 Dalton St.	
CITY-ST-ZIP	Port Charlotte FL 33952	
TITLE	D	☐ Change ☒ Addition
NAME	Joyce Grace	
STREET ADDRESS	26105 Tattersall Lane	
CITY-ST-ZIP	Punta Gorda, FL 33983	
TITLE	D	☐ Change ☒ Addition
NAME	Betty Ross	
STREET ADDRESS	4200 Pinecrest Dr.	
CITY-ST-ZIP	Punta Gorda, FL 33982	

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: *Juanita S. Wynn* **REQUIRE** *Juanita S. Wynn 5/9/03 941-525-4700*

CR2E037 (10/02)