

2001 UNIFORM BUSINESS REPORT (UBR)

FILED

Apr 10, 2001 8:00 am
Secretary of State

04-10-2001 90079 005 ****61.25

DOCUMENT # N94000003814

1. Entity Name

OUR MOTHER'S HOME OF SOUTHWEST FLORIDA, INC.

Principal Place of Business

7438 Carrier Rd.
18274 POPLAR RD.
FORT MYERS FL 33912

Mailing Address

7438 Carrier Rd.
P.O. BOX 835
ESTERO FL 33928

2. Principal Place of Business

7438 Carrier Rd.
Suite, Apt. #, etc.

3. Mailing Address

← Same
Suite, Apt. #, etc.

City & State

Fort Myers

City & State

Fort Myers

Zip

33912

Country

USA

Zip

33928

Country

USA

4. FEI Number

65-0510103

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

COPPAGE, HELEN C
18274 POPLAR RD
FORT MYERS FL 33912

Deceased

7. Name and Address of New Registered Agent

Name

Janet F. Herman, Director

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

7438 Carrier Road

City

Fort Myers

FL

Zip Code

33912

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

Janet F. Herman

Janet F. Herman, Director

4-4-01

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

TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP COPPAGE, HELEN 18274 POPLAR RD. FORT MYERS FL 33912 Deceased	☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T CONLEY, ROSEMARY 4223 DEL PRADO BLVD CAPE CORAL FL Resigned	☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S ARABIE, JACQUELINE 9874 SPRING RIDGE CIRCLE ESTERO FL 33928 Resigned	☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP CONLEY, MICHAEL 9220 BONITA BEACH ROAD BONITA SPRINGS FL 33923 Resigned	☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D FABBRO, RICHARD 2363 UNION ST. FORT MYERS FL 33901	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D RAWSON, MARTHA 20894 COUNTRY BARN DRIVE ESTERO FL 33928	☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP John Weinzettle 6723 Sea Isle Dr. Ft Myers FL 33908	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T Patricia Vavrek 20741 River's Ford Estero FL 33928	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S June Stone 10728 Bahia Terrado Circle Estero FL 33928	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Dr. Martin McKenna 28321 S. Tamiami Tr. #103 Bonita Springs FL 34135	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Barry Getch 9089 Pincapple Rd Ft Myers FL 33912	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Tammy Farrell 9009 Frank Rd. Ft Myers FL 33912	☐ 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

Janet F. Herman

Janet F. Herman 4/4/01 267-4663

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (10/00)