

# 2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N94000004810

1. Entity Name

GULFSHORE OPTIMIST CLUB OF CAPE CORAL, INC.

**FILED**  
**Jan 10, 2002 8:00 am**  
**Secretary of State**

01-10-2002 90015 011 \*\*\*\*61.25

0004810

Principal Place of Business Mailing Address  
240 SE 6 STREET 240 SE 6 STREET  
CAPE CORAL FL 33990-1541 CAPE CORAL FL 33990-1541

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 65-0513532

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

DELORENZO, THELMA  
240 SE 6 STREET  
CAPE CORAL FL 33990-1541

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

TITLE NAME STREET ADDRESS CITY-ST-ZIP  
P FUTRAL, LINDA 117 WINDSOR COURT CAPE CORAL FL 33904-9719 ☒ Delete  
V PESEK, HELEN 4240 SE 20 PLACE CAPE CORAL FL 33904-5456 ☐ Delete  
D HEINRICH, ANNA 2526 SE 20TH AVE CAPE CORAL FL 33904-3226 ☐ Delete  
TS DELORENZO, THELMA 240 SE 6 STREET CAPE CORAL FL 33990-1541 ☐ Delete  
D DORVAL, ADELINE 4825 TARPON COURT CAPE CORAL FL 33904-9410 ☐ Delete  
D SWEET, MARY 1102 SE 14 STREET CAPE CORAL FL 33990-3765 ☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE NAME STREET ADDRESS CITY-ST-ZIP ☒ Change ☐ Addition  
P COHEN PARKINSON 623 SE 15 TERR CAPE CORAL FL 33990-2206  
D JUANITA MORTON 306 NE 17 PLACE CAPE CORAL FL 33904-2206 ☒ 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: *Thelma Delorenzo* 1-7-02  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #  
THELMA DELORENZO 9414580834

CR02037 (9/01)