

# 2002 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Apr 02, 2002 8:00 am**  
**Secretary of State**

0047104

**DOCUMENT # N95000003233**

1. Entity Name

**SOUTHWEST FLORIDA JUNIOR GOLF ASSOCIATION, INC.**

04-02-2002 90903 042 \*\*\*\*61.25

Principal Place of Business

Mailing Address

P.O. BOX 214  
 ESTERO FL 33928-0214

P.O. BOX 214  
 ESTERO FL 33928-0214

2. Principal Place of Business

3. Mailing Address

8695 College Pkwy  
 Suite, Apt. #, etc.  
 Ste. 304

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 Suite, Apt. #, etc.  
 Ste. 304

City & State

City & State

Ft. Myers, Florida

Ft. Myers, Florida

Zip  
 33919

Country  
 USA

Zip  
 33919

Country  
 USA

4. FEI Number

65-0593677

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

WHITWORTH, GREGORY D  
 1345-A CRYSTAL WAY  
 MELRAY BEACH FL 33444

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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

T  
 MASTERS, DAVE  
 312 SW 2ND AVE  
 CAPE CORAL FL 33991

☐ Change ☐ Addition

V  
 LEWIS, GARY A  
 880 3RD STREET  
 FT MYERS BEACH FL 33931

☐ Change ☐ Addition

S  
 BURGESS, BOB  
 1417 S E 12TH TERRACE  
 CAPE CORAL FL 33990

☐ Change ☐ Addition

D  
 HUTNIK, STEVE  
 8849 BANYAN COVE  
 FORT MYERS FL 33919

☐ Change ☐ Addition

D  
 LEWIS, JEANNE  
 880 3RD ST  
 FT MYERS BEACH FL

☐ Change ☐ Addition

P  
 SHERMAN, DONALD  
 1572 ARGYLE DR  
 FT MYERS FL 33919

☐ 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:

**REQUIRED**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/27/02

Date

9415748139

Daytime Phone #

CR2E037 (9/01)