

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N96000002022

1. Entity Name

CITIZENS FOR CONTROL OF AIRPORT NOISE, INC.

Principal Place of Business

559 15TH AVENUE SOUTH
NAPLES FL 34102
US

Mailing Address

POST OFFICE BOX 2111
NAPLES FL 34106-2111

2. Principal Place of Business

610 Jacana Circle

3. Mailing Address

Suite, Apt. #, etc.

City & State

Naples, FL

City & State

Zip

34105-7422

Country

US

Country

4. FEI Number

65-0661990

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

GREGORY, C. NEIL
4001 TAMiami TRAIL NORTH, SUITE 404
NAPLES FL 33940

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.

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 EMER COYLE, FRED ☒ Delete
STREET ADDRESS 1986 FOURTH STREET SOUTH
CITY-ST-ZIP NAPLES FL 34102

TITLE NAME PTD BUSCH, BILL ☐ Delete
STREET ADDRESS 599 15TH AVENUE SOUTH
CITY-ST-ZIP NAPLES FL 34102

TITLE NAME D OPPENHEIM, AL ☐ Delete
STREET ADDRESS 1100 8TH AVENUE SOUTH, APT. 229K
CITY-ST-ZIP NAPLES FL 34102

TITLE NAME D SOULARD, RON ☐ Delete
STREET ADDRESS 1595 AVION PLACE
CITY-ST-ZIP NAPLES FL 34104

TITLE NAME V WILSON, SAM ☒ Delete
STREET ADDRESS 3447 MARBELLA CT.
CITY-ST-ZIP BONITA SPRINGS FL 34134

TITLE NAME D COBB, RICHARD ☐ Delete
STREET ADDRESS 930 18TH AVE. SOUTH
CITY-ST-ZIP NAPLES FL 34102

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE NAME ☐ Change ☐ Addition
STREET ADDRESS
CITY-ST-ZIP

TITLE NAME 610 Jacana Circle ☒ Change ☐ Addition
STREET ADDRESS Naples, FL 34105-7422
CITY-ST-ZIP

TITLE NAME ☐ Change ☐ Addition
STREET ADDRESS
CITY-ST-ZIP

TITLE NAME ☐ Change ☐ Addition
STREET ADDRESS
CITY-ST-ZIP

TITLE NAME ☐ Change ☐ Addition
STREET ADDRESS
CITY-ST-ZIP

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:

BILL BUSCH (Bill Busch)

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-21-00

(941) 263-0927

Date

Daytime Phone #

CR2E037 (9/99)