

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

**FILED**  
**Feb 13, 2003 8:00 am**  
**Secretary of State**

02-13-2003 90256 015 \*\*\*\*70.00

**DOCUMENT # N96000004512**

1. Entity Name  
**THE SOUTHWEST FLORIDA BIRD CLUB, INC.**



Principal Place of Business

**550 27TH STREET NW  
NAPLES FL 34120  
US**

Mailing Address

**PO BOX 990195  
NAPLES FL 34120  
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 **59-3400302**

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

**HESSER, CHARLES  
550 27TH STREET NW  
NAPLES FL 34120**

7. Name and Address of New Registered Agent

Name **T. H. Koppe**

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

**27544 Big Bend Rd.**

City **Bonita Springs**

**FL**

Zip Code **34134**

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 **T. H. Koppe, President**

(NOTE: Registered Agent signature required when reinstating)

DATE **02/10/03**

**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

TITLE **PD** ☒ Delete  
NAME **HESSER, CHARLES**  
STREET ADDRESS **550 27TH STREET NW**  
CITY-ST-ZIP **NAPLES FL 34120**

TITLE **VD** ☒ Delete  
NAME **LEPPER, SCARLETT**  
STREET ADDRESS **2581 2 STREET NE**  
CITY-ST-ZIP **NAPLES FL 34120**

TITLE **SD** ☐ Delete  
NAME **LOTT, SHARON**  
STREET ADDRESS **837 COCONUT CR. W**  
CITY-ST-ZIP **NAPLES FL 34104**

TITLE **TD** ☐ Delete  
NAME **LEZGUS, KATHY**  
STREET ADDRESS **3255 15. AVE SW**  
CITY-ST-ZIP **NAPLES FL 34117**

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE **PD** ☒ Change ☐ Addition  
NAME **T. H. Koppe**  
STREET ADDRESS **BONITA SPGS, FL. 34134**  
CITY-ST-ZIP **27544 BIG BEND RD**

TITLE **VD** ☒ Change ☐ Addition  
NAME **Joseph A Campbell**  
STREET ADDRESS **1930 19th St W**  
CITY-ST-ZIP **NAPLES FL 34116**

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

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

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

TITLE ☐ Change ☐ Addition  
NAME  
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: **KOPPE**

**02/10/03 239-992-2228**

CR2E037 (10/02)