

2000 UNIFORM BUSINESS REPORT (UBR)

FILED

Jun 12, 2000 8:00 am
Secretary of State

06-12-2000 90040 006 ****61.25

DOCUMENT # N 96 00660 5790
1. Entity Name
TEENS AGAINST DOUGS AND ALCOHOL
OF SOUTHWEST FLORIDA

Principal Place of Business
1900 HONDA DR
UNIT 4
FT. MYERS, FL 33907
Mailing Address
2407 EAST MALL DR
FT. MYERS, FL 33901

2. Principal Place of Business
Suite, Apt. #, etc.
City & State
Zip
Country
3. Mailing Address
Suite, Apt. #, etc.
City & State
Zip
Country

4. FEI Number 65-0083443
Applied For
Not Applicable
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
STEPHEN NARDONE
1422 NE 5TH LANE
CAFE CORAL, FL 33909

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 STEPHEN NARDONE
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 PRFS. + TRFAS
NAME STEPHEN NARDONE
STREET ADDRESS 1422 NE 5TH LANE
CITY-ST-ZIP CAFE CORAL FL 33909
TITLE VICE PRESIDENT
NAME BARBRA NARDONE
STREET ADDRESS 1422 NE 5TH LANE
CITY-ST-ZIP CAFE CORAL FL 33909
TITLE SECRETARY
NAME ROBERT CHRISTMAN #
STREET ADDRESS 5580 FOUNTAIN LAKE CR. 206
CITY-ST-ZIP BRADENTON, FL 34207
TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10
TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
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TITLE
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: Stephen J. Nardone
Signature, typed or printed name of signing officer or director
Date
Deputy Phone #

CR2E037 (9/99)