

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 19, 2001 8:00 am
Secretary of State

0070272

DOCUMENT # N96000005881

03-19-2001 90029 050 ****61.25

1. Entity Name

THE FORT MYERS BEACH BUILD A POOL FOUNDATION, IN

Principal Place of Business

Mailing Address

2523 ESTERO BLVD
 FT MYERS BEACH FL 33931

P.O. BOX 6024
 FT MYERS BEACH FL 33932
 US

00004001



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

65-0735874

Applied For

Not Applicable

Zip

Country

Zip

Country

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

BUNTING, ELLIE
21681 INDIAN BAYOU DR
FT MYERS BEACH FL 33931

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

TITLE	PS/D	<input type="checkbox"/> Delete
NAME	BUNTING, ELLIE	
STREET ADDRESS	21681 INDIAN BAYOU DR	
CITY-ST-ZIP	FT MYERS BEACH FL	
TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	MCINTYRE, CURT	
STREET ADDRESS	14885 MARTIN DR	
CITY-ST-ZIP	FORT MYERS FL 33908	
TITLE	TD	<input checked="" type="checkbox"/> Delete
NAME	MCINTYRE, DEBRA	
STREET ADDRESS	14885 MARTIN DR	
CITY-ST-ZIP	FORT MYERS FL 33908	
TITLE	PD TD	<input type="checkbox"/> Delete
NAME	TAYLOR, KITTY	
STREET ADDRESS	7401 ESTERO BLVD	
CITY-ST-ZIP	FORT MYERS BEACH FL 33931	
TITLE	VD	<input type="checkbox"/> Delete
NAME	PEARSON, ELEANOR	
STREET ADDRESS	145 ANCHORAGE	
CITY-ST-ZIP	FORT MYERS BEACH FL 33931	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE	S/D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BUNTING, ELLIE	TITLE ONLY
STREET ADDRESS	21681 INDIAN BAYOU DR	
CITY-ST-ZIP	FT. MYERS BEACH, FL. 33931	
TITLE	R/D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	LUND, MICHAEL	
STREET ADDRESS	300 BAHIA VIA	
CITY-ST-ZIP	FORT MYERS BEACH, FL 33931	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	T/D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	TAYLOR, KITTY	TITLE ONLY
STREET ADDRESS	7401 ESTERO BLVD.	
CITY-ST-ZIP	FT. MYERS BEACH, FL. 33931	
TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	MYERS, FRAN	
STREET ADDRESS	21481 WIDGEDN TERRACE	
CITY-ST-ZIP	FT. MYERS BEACH, FL. 33931	
TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	SMITH, ROXIE	
STREET ADDRESS	21521 MADERA	
CITY-ST-ZIP	FT. MYERS BEACH, FL. 33931	

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 149.07(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: *[Signature]*
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/15/01 (941) 463-4437
 Date Daytime Phone #

CR2E037 (10/00)