

**NOT-FOR-PROFIT CORPORATION  
UNIFORM BUSINESS REPORT (UBR)**

**FILED**  
**Mar 19, 2002 8:00 am**  
**Secretary of State**

03-19-2002 90014 044 \*\*\*\*61.25

**DOCUMENT #** *N96000005881*

**1. Entity Name**  
*THE FORT MYERS BEACH BUILD A POOL FOUNDATION INC.*

**DO NOT WRITE IN THIS SPACE**

**425453**

**2. Principal Place of Business**  
*2523 ESTERO BLVD.*  
Suite, Apt. #, etc.

**3. Mailing Address**  
*P.O. Box 6024*  
Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

**City & State**  
*FT MYERS BEACH, FL.*  
**Zip**  
*33931*  
**Country**  
*US*

**City & State**  
*FT MYERS BEACH, FL.*  
**Zip**  
*33932*  
**Country**  
*US*

**4. FEI Number**  
*65-0735874*  
**Applied For**  
Not Applicable  
**5. Certificate of Status Desired** ☐ **\$8.75 Additional Fee Required**

**DO NOT WRITE  
IN THIS SPACE**

**7. Name and Address of Current Registered Agent**

**Name** *ELLIE BUNTING*  
**Street Address (P.O. Box Number is Not Acceptable)**  
*21681 INDIAN BAYOU DR*  
**City** *FT. MYERS BEACH* **FL** **Zip Code** *33931*

**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 \_\_\_\_\_

**FEE IS \$61.25**  
**Initial or Amended UBR**

**9. Election Campaign Financing** ☐ **\$5.00 May Be Added to Fees**

**Make Check Payable to Department of State**

**10. OFFICERS AND DIRECTORS**

<b>TITLE</b> <i>D/SEC.</i>	<b>NAME</b> <i>ELLIE BUNTING</i>	<b>STREET ADDRESS</b> <i>21681 INDIAN BAYOU DR.</i>	<b>CITY - ST - ZIP</b> <i>FT. MYERS BEACH, FL. 33931</i>
<b>TITLE</b> <i>D/PRES.</i>	<b>NAME</b> <i>MICHAEL LUND</i>	<b>STREET ADDRESS</b> <i>300 BAHIA VIA</i>	<b>CITY - ST - ZIP</b> <i>FT. MYERS BEACH, FL. 33931</i>
<b>TITLE</b> <i>D/V-PRES.</i>	<b>NAME</b> <i>ELEANOR PEARSON</i>	<b>STREET ADDRESS</b> <i>145 ANCHORAGE</i>	<b>CITY - ST - ZIP</b> <i>FT. MYERS BEACH, FL. 33931</i>
<b>TITLE</b> <i>D/TREAS.</i>	<b>NAME</b> <i>KITTY TAYLOR</i>	<b>STREET ADDRESS</b> <i>13741 DOWNING LN. Q-2</i>	<b>CITY - ST - ZIP</b> <i>FT. MYERS, FL. 33919</i>
<b>TITLE</b> <i>D</i>	<b>NAME</b> <i>FRAN MYERS</i>	<b>STREET ADDRESS</b> <i>21481 WIDGEON TERRACE</i>	<b>CITY - ST - ZIP</b> <i>FT. MYERS BEACH, FL. 33931</i>
<b>TITLE</b> <i>D</i>	<b>NAME</b> <i>ROXIE SMITH</i>	<b>STREET ADDRESS</b> <i>21521 MADERA RD.</i>	<b>CITY - ST - ZIP</b> <i>FT. MYERS BEACH, FL. 33931</i>

**DO NOT WRITE  
IN THIS SPACE**

**12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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 on an attachment with an address, with all other like empowered.**

**SIGNATURE:** *Kitty Taylor* **(KITTY TAYLOR) TREAS.** *02/28/02* *(941) 482-1646*  
Signature and typed or printed name of signing officer or director Date Daytime Phone #

CR2E037B (12/01)