

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N97000005662

1. Entity Name

THE ASHLAND INC. RETIREES CLUB OF SOUTHWESTERN F

FILED
Apr 07, 2000 8:00 am
Secretary of State

04-07-2000 90066 002 ****61.25

Principal Place of Business

Mailing Address

C/O APAC-FLORIDA, INC.
10230 ALICO ROAD
FT. MYERS FL 33913

C/O APAC-FLORIDA, INC.
10230 ALICO ROAD
FT. MYERS FL 33913-8221

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

31-1591682

Applied For

Not Applicable

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

TANNER, WESLEY U
C/O APAC-FLORIDA, INC.
10230 ALICO ROAD
FT. MYERS FL 33913

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

STREET ADDRESS

CITY-ST-ZIP

PD
GARGES, ALAN R
200 SUN DR.
N. FT. MYERS FL 33903-5666

☐ Delete

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

VD
SAUNDERS, RICHARD L
5260 S LANDINGS DR #603
FT. MYERS FL 33919

☐ Delete

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

VD
MARRS, SAMUEL R
25490 COCKLESHELL DRIVE #602
BONITA SPRINGS FL 34135

☐ Delete

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

VD
WELTER, ROBERT L
5561 MONTILLA DRIVE
FT. MYERS FL 33919

☐ Delete

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

S
GREEN, CHARLOTTE
205 PIER A
NAPLES FL 33962-8109

☐ Delete

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

TD
ZANDONA, OLIVER J
4105 STEAMBOAT BEND E
FT. MYERS FL 33919

☐ Delete

11.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

☐ Change

☐ Addition

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

☐ Change

☐ Addition

TITLE

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STREET ADDRESS

CITY-ST-ZIP

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☐ Change

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NAME

STREET ADDRESS

CITY-ST-ZIP

☐ Change

☐ Addition

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: *ALAN R GARGES* ALAN R GARGES

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/10/2000

Date

941/656-5627

Daytime Phone #

CR2E037 (9/99)