

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 21, 2002 8:00 am
Secretary of State

02-21-2002 90068 036 ****61.25

DOCUMENT # N99000001926

1. Entity Name
ESTERO ART LEAGUE, INC.

Principal Place of Business BOX 864 ESTERO FL 33928	Mailing Address BOX 864 ESTERO FL 33928
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2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.

City & State	City & State
Zip	Country

4. FEI Number NOT APPLICABLE	Applied For Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

**BRADY, CAROL
 20535 SOUTH TAMiami TRAIL
 ESTERO FL 33928**

7. Name and Address of New Registered Agent

Name
Street Address (P.O. Box Number is Not Acceptable)
City
State: 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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

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	DP	<input type="checkbox"/> Delete
NAME	NEWEN HISEN, BARBARA	
STREET ADDRESS	20781 PORT DR	
CITY-ST-ZIP	ESTERO FL 33928	
TITLE	DV	<input type="checkbox"/> Delete
NAME	MCNEELY, DON	
STREET ADDRESS	20712 COUNTRY BARN DR	
CITY-ST-ZIP	ESTERO FL 33928	
TITLE	DS	<input type="checkbox"/> Delete
NAME	BATES, HEIDI	
STREET ADDRESS	9790 SASSAFRAD CIRCLE	
CITY-ST-ZIP	ESTERO FL 33928	
TITLE	DS	<input type="checkbox"/> Delete
NAME	ALLEN, RUTH	
STREET ADDRESS	22071 WEST TREE DR	
CITY-ST-ZIP	ESTERO FL 33928	
TITLE	DT	<input type="checkbox"/> Delete
NAME	HORNE, PAT	
STREET ADDRESS	20584 HIGHLANDS	
CITY-ST-ZIP	ESTERO FL 33928	
TITLE	DT	<input checked="" type="checkbox"/> Delete
NAME	RAY, BETTY	
STREET ADDRESS	24020 PRODUCTION CIRCLE LOT 111	
CITY-ST-ZIP	BONITA SPRINGS FL 34135	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	DI LEPSCHE, GRETA
STREET ADDRESS	20008 ORANGE TREE
CITY-ST-ZIP	ESTERO, FLORIDA 33928

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: *Barbara Newen Hisen* DATE: *1/17/02* DAYTIME PHONE #: *498 2366*

CR2E037 (9/01)