

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N99000003736

1. Entity Name

PARKS FOR PEOPLE, INC.

FILED

May 31, 2000 8:00 am  
Secretary of State

05-31-2000 90097 011 \*\*\*\*70.00

Principal Place of Business

Mailing Address

9200 BONITA BEACH ROAD, SUITE 204  
BONITA SPRINGS FL 34135

9200 BONITA BEACH ROAD, SUITE 204  
BONITA SPRINGS FL 34135-4278

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

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

SPEAR, JOHN D.  
9200 BONITA BEACH ROAD, SUITE 204  
BONITA SPRINGS FL 34135

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 D ☐ Delete  
NAME SHOEMAKER, VERONICA SAPP  
STREET ADDRESS 3054 MANGO STREET  
CITY-ST-ZIP FT. MYERS FL 33916

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE S D ☐ Delete  
NAME TRUSSELL PYLE, HOMER  
STREET ADDRESS 846 XAVIER AVENUE N.  
CITY-ST-ZIP FT. MYERS FL 33919

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE P/D D ☐ Delete  
NAME LUCKEY, R. FLOYD JR  
STREET ADDRESS 5164 BONITA BEACH RD.  
CITY-ST-ZIP BONITA BEACH FL 34134

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE T D ☐ Delete  
NAME SPEAR, JOHN D  
STREET ADDRESS 9200 BONITA BEACH RD., STE. 204  
CITY-ST-ZIP BONITA SPRINGS FL 34135

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE D ☐ Delete  
NAME DESALVO, ANDREW P  
STREET ADDRESS 1425 REYNARD DRIVE  
CITY-ST-ZIP FT. MYERS FL 33919

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE VP D ☐ Delete  
NAME WEAVER, RONALD  
STREET ADDRESS 1500 PALM SQUARE BLVD., #105  
CITY-ST-ZIP FT. MYERS FL 33919

TITLE ☐ Change ☐ Addition  
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:

SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

5/15/00

941 947-4109

CR2E037 (9/99)