2000 UNIFORM BUSINESS REPORT (UBR)

FILED Jan 18, 2000 08:00 AM DOCUMENT # N9900005025 1. Entity Name **Secretary of State** CAPE HARBOUR CIVIC ASSOCIATION INC. Principal Place of Business Mailing Address 5611 MERLYN LANE 5611 MERLYN LANE CAPE CORAL FL FL CAPE CORAL 33914 33914 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 65-0938447 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired X Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name REICHEL 5611 MERLYN LANE Street Address (P.O. Box Number is Not Acceptable) CAPE CORAL FL33914 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. 01/18/2000 **SIGNATURE** Signature, typed or printed name of registered agent and title if applicable. (NOTE Registered Agent signature required when reinstating) FILE NOW: 9. Election Campaign Financing Make Check Payable to \$5.00 May Be Trust Fund Contribution. **FEE IS \$61.25** Added to Fees Department of State 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 TITLE Delate TITLE TD ☐ Addition NAME GORLA JOHN NAME GORLA JOHN STREET ADDRESS 5611 MERLYN LANE STPEET ADDRESS 5611 MERLYN LANE CITY-ST-ZIP CITY-ST-ZIP CAPE CORAL FL33914 CAPE CORAL FL33914 TITLE ☐ Delete ☐ Change ☐ Addition NAME COMMESSO ANTHONY NAME STREET ADDRESS 2304 SAGRAMORE PL. STREET ADDRESS CITY-ST-ZIP CAPE CORAL 33914 CITY-ST-ZIP TITLE ☐ Delete TITLE TD X Change Addition NAME NAME HEISS CHRIS HEISS CHRIS STREET ADDRESS 5611 MERLYN LANE 5611 MERLYN LANE STREET ADDRESS CITY-ST-ZIP CITY-ST-7iP CAPE CORAL FL 33914 CAPE CORAL FL. 33914 TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME REICHEL DARLENE STREET ADDRESS 5611 MERLYN LANE STREET ADDRESS CITY-ST-ZIF CAPE CORAL 33914 CITY-ST-ZIP TITLE ☐ Delete VD TITLE Change ☐ Addition NAME VITALE ARTHUR NAR/F STREET ADDRESS 5611 MERLYN LANE STREET ADDRESS CITY-ST-ZIP CAPE CORAL CITY-ST-ZIP FL 33914 TITLE PD ☐ Delete TITLE Change | ☐ Addition NAME REICHEL STREET ADDRESS 5611 MERLYN LANE STREET ADDRESS

CITY-ST-ZIP

FL 33914

CITY-ST-ZIP

CAPE CORAL

^{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.

DAVIC SANVIDGE DIRECTOR 5513 HARBOUR CIRCLE

CAPE CORAL, FLORIDA 33914

DENIS NOAH DIRECTOR 5513 LANCELOT LANE

CAPE CORAL, FLORIDA 33914

ARNOLD SMALL DIRECTOR 2318 SAGRAMORE PLACE

CAPE CORAL, FLORIDA 33914

FRANK HEISS DIRECTOR 5611 MERLYN LANE

CAPE CORAL, FLORIDA 33914

DENIS NOAH DIRECTOR 5513 LANCELOT LANE

ARNOLD SMALL DIRECTOR
2318 SAGRAMORE PLACE

CAPE CORAL, FLORIDA 33914

FRANK HEISS DIRECTOR 5611 MERLYN LANE

CAPE CORAL, FLORIDA 33914