

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N99000005293

1. Entity Name

IONA-HOPE EPISCOPAL CHURCH, INC.

FILED
Mar 11, 2002 8:00 am
Secretary of State

03-11-2002 90085 028 ****61.25

Principal Place of Business

9650 GLADIOLUS DRIVE
FORT MYERS FL 33908

Mailing Address

9650 GLADIOLUS DRIVE
FORT MYERS FL 33908

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

65-0960136

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

TRIPP, THEODORE L JR.
2532 FIRST STREET
FORT MYERS FL 33908

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: PD
NAME: ADLER, JOHN S
STREET ADDRESS: 9650 GLADIOLUS DRIVE
CITY-ST-ZIP: FORT MYERS FL 33908 ☐ Delete

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

TITLE: VD
NAME: MYERS, WALLACE
STREET ADDRESS: 9650 GLADIOLUS DRIVE
CITY-ST-ZIP: FORT MYERS FL 33908 ☐ Delete

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

TITLE: SD
NAME: ORTIZ, MICHELLE
STREET ADDRESS: 9650 GLADIOLUS DRIVE
CITY-ST-ZIP: FORT MYERS FL 33908 ☒ Delete

TITLE: SD
NAME: MARGO FARRARA
STREET ADDRESS: 9650 GLADIOLUS DR
CITY-ST-ZIP: FORT MYERS, FL 33908 ☐ Change ☒ Addition

TITLE: T
NAME: HUGHES, JUDITH
STREET ADDRESS: 9650 GLADIOLUS DRIVE
CITY-ST-ZIP: FORT MYERS FL 33908 ☐ Delete

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

TITLE: D
NAME: BAUMEISTER, LEROY
STREET ADDRESS: 9650 GLADIOLUS DRIVE
CITY-ST-ZIP: FORT MYERS FL 33908 ☒ Delete

TITLE: D
NAME: DAM WUSTER
STREET ADDRESS: 9650 GLADIOLUS DR
CITY-ST-ZIP: FORT MYERS, FL 33908 ☐ Change ☒ Addition

TITLE: D
NAME: ADLER, WANDA L
STREET ADDRESS: 9650 GLADIOLUS DRIVE
CITY-ST-ZIP: FORT MYERS FL 33908 ☐ Delete

TITLE: ☐ Change ☐ Addition
NAME: ☐ Change ☐ Addition
STREET ADDRESS: ☐ Change ☐ Addition
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 another like empowered.

SIGNATURE:

SIGNATURE OF REGISTERED AGENT

Date

Daytime Phone #

CR2E037 (9/01)