

**FOR PROFIT CORPORATION  
UNIFORM BUSINESS REPORT (UBR)**

**FILED**  
**May 27, 2002 8:00 am**  
**Secretary of State**

05-27-2002 90327 014 \*\*\*150.00

DOCUMENT # PO1000042708 ✓

1. Entity Name

CABINTEELY ENTERPRISES INC.

**DO NOT WRITE IN THIS SPACE**

2. Principal Place of Business

1342 COLONIAL BLVD

Suite, Apt. #, etc.

SUITE E-33

City & State

FORT MYERS, FL

Zip

33907

Country

U.S.A.

3. Mailing Address

1342 COLONIAL BLVD

Suite, Apt. #, etc.

SUITE E-33

City & State

FORT MYERS, FL

Zip

33907

Country

U.S.A.

DO NOT WRITE IN THIS SPACE

4. FEI Number

65-1098748

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

7. Name and Address of Current Registered Agent

Name

YVONNE MCQUILLAN

Street Address (P.O. Box Number is Not Acceptable)

7023 CEDARHURST DR #3

FORT MYERS

City

**FL**

Zip Code

33919

**DO NOT WRITE  
IN THIS SPACE**

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

9. This corporation is eligible to satisfy its Intangible  
Tax filing requirement and elects to do so.  
(See criteria on back) ☐

**January 1 - May 1 Fee is \$150.00**

**After May 1, Fee is \$550.00**

**Amended UBR is \$61.25**

**Make Check Payable to Department of State**

10. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

11. OFFICERS AND DIRECTORS

TITLE P/S/T/D  
NAME YVONNE MCQUILLAN  
STREET ADDRESS 7023 CEDARHURST DR, APT 3  
CITY - ST - ZIP FORT MYERS, FL 33919-6729

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IN THIS SPACE**

13. 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 607, Florida Statutes; and that my name appears in Block 11 or on an attachment with an address, with all other like empowered.

SIGNATURE:

Yvonne McQuillan  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

5/17/02 (941) 274-9600  
Date Daytime Phone #

CR2E034B (12/01)

ATTACH # PO10000042708/671586

# Hibernian Private School

1342 Colonial Boulevard, Suite E-33, Fort Myers, FL 33907

Tel : (941) 274-9600 Fax : (941) 274-8629 Email : Hibernianschool@aol.com

To Whom It May Concern:

I am a new business owner and have just discovered I need to file the enclosed form. Apparently I should have received this form in the mail, but did not. When a friend (also a small business owner) asked had I filed I didn't know what he was talking about. I called your office and spoke to Scott, who told me to print the form from the website and return it with a check for \$150 and an explanation for the late filing.

I hope this is acceptable. I am struggling to get my business off the ground and to meet all the requirements. I will obviously know from now on that this report is due every year.

Thank you,



Yvonne Mc Quillan  
President, Cabinteely Enterprises Inc.  
(dba Hibernian Private School)