

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # **P97030042613**

1. Entity Name

Bayshore Company of Lee County Inc

FILED
Mar 22, 2001 8:00 am
Secretary of State

03-22-2001 90009 038 ***150.00

C0036512

Principal Place of Business

**11620 Bayshore
40 Spindler
N. Ft. Myers, FL 33917
US**

Mailing Address

**11620 Bayshore
40 Spindler
North Ft Myers, FL 33917
US**

2. Principal Place of Business

40 Jane Lamberson

3. Mailing Address

40 Jane Lamberson

Suite, Apt. #, etc.

4501 Tamiami Tr. N. # 204

Suite, Apt. #, etc.

4501 Tamiami Tr. N. # 204

DO NOT WRITE IN THIS SPACE

City & State

Naples FL

City & State

Naples, FL

4. FEI Number

650756716

Applied For

☐ Not Applicable

Zip

34103

Country

USA

Zip

34103

Country

USA

5. Certificate of Status Desired

☐

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**Rose, Stanley #
2110 Imperial EC Boulevard
Naples, FL 34110**

7. Name and Address of New Registered Agent

Name

Jane Lamberson

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

4501 Tamiami Trail N. # 204

City

Naples

FL

Zip Code

34103

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

Jane E. Lamberson / J.L. Jane Lamberson

3/6/01

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) ☐

**FILE NOW!!! FEE IS \$150.00
After MAY 1, 2001 Fee will be \$550.00
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

PSD Spindler Guenther ☐ Delete
11590 Bayshore
N. Ft Myers, FL 33917

VPD Spindler, Inge ☐ Delete
11590 Bayshore
North Ft Myers, FL 33917

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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 Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Guenter Spindler / GS

3/6/01

9415663511

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Guenter Spindler President Date Daytime Phone #

CR2E034 (11/00)