2002 UNIFORM BUSINESS REPORT (UBR)

Feb 13, 2002 8:00 am Secretary of State DOCUMENT # **N21825** 1. Entity Name 02-13-2002 90119 013 ****70.00 THE WESTSIDE, WEST PALM BEACH KIWANIS CLUB FOUND ATION, INC. Principal Place of Business Mailing Address ## CELVEDERE RD P.O. BOX 16995 BERALM BEACH FL 33480 WEST PALM BEACH FL 33416 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 65-0953683 Not Applicable Country Zip Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7._Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) JOHNSON, RANDY K SR 1900 W. 23RD STREET RIVIERA BEACH FL 33404 City Zip Code FL 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 DATE (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing **\$5.00** May Be Make Check Payable to FILE NOW: FEE IS \$61.25 Trust Fund Contribution. Added to Fees **Department of State** 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 TITLE ☐ Delete TITLE 10/6) Change ☐ Addition NAME JOHNSON, RANDY K SR NAME STREET ADDRESS 1900 W. 23RD STREET STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP RIVIERA BEACH FL 33404 TITLE ☐ Delete TITLE Change ☐ Addition JOHNSON, GINGER NAME NAME 4886 CLASSIC LANE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP WEST PALM BEACH FL 33417 CITY-ST-ZIP TITLE TITLE Delete CARLINO, STEVE NAME NAME SOM L INSHORE DRIVE STREET ADDRESS 899 SUNFLOWER AVE STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP **DELRAY BEACH FL 33445** BEACH GARDENS, FL 3340 TITLE Delete TITLE Change ☐ Addition KORF, DOLORES NAME NAME STREET ADDRESS 3701 B SAUDRY LANE STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP WEST PALM BCH FL 33417 **⊠** Delete TITLE Change ☐ Addition AUYIER, JAMIE NAME JOHNSON , BARBARA 1900 W. 2312 STREE STREET ADDRESS 6209 HOLLYWOOD ST. STREET ADDRESS CITY-ST-ZIP WEST PALM BEACH FL 33408 CITY-ST-ZIP BGACH, TITLE □ Delete TITLE NAME ROTHFUSS, JOHN NAME MAC DONALD STREET ADDRESS 6212 17TH DR S # 909 STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP WEST PALM BEACH FL 33415 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.

FILED

SIGNATURE: X 200 X 1 STATE AND K. JOHNSON, SR. 848-9393