

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 12, 2002 8:00 am
Secretary of State

01-21-2002 90029 027 ****61.25

DOCUMENT # N37391

1. Entity Name

KIWANIS CLUB OF ST. AUGUSTINE CORPORATION

Principal Place of Business

Mailing Address

P.O. BOX 637
 ST. AUGUSTINE FL 32085-7637

P.O. BOX 637
 ST. AUGUSTINE FL 32085-7637

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

59-3017853

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

Name

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

City

FL

Zip Code

EBERLING, ROBERT CPA
1400 OLD DIXIE HWY
SUITE D
ST. AUGUSTINE FL 32084

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	D	☒ Delete
NAME	BLEWETT, JOE B	
STREET ADDRESS	8200 A1A SOUTH #37	
CITY-ST-ZIP	ST AUGUSTINE FL 32080	
TITLE	D	☐ Delete
NAME	PETERSON, RANDALL	
STREET ADDRESS	P.O. BOX 1690	
CITY-ST-ZIP	ST AUGUSTINE FL 32085	
TITLE	D	☐ Delete
NAME	EBERLING, ROBERT	
STREET ADDRESS	437 BIG TREE RD	
CITY-ST-ZIP	PONTE VEDRA BEACH FL 32082	
TITLE	D	☒ Delete
NAME	BRODY, STEVE	
STREET ADDRESS	103 SAN RAFAEL RD	
CITY-ST-ZIP	ST AUGUSTINE FL 32080	
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE	HARRY WALDRON (D)	☐ Change ☒ Addition
NAME	DIRECTOR	
STREET ADDRESS	118 COLON AVE	
CITY-ST-ZIP	ST. AUGUSTINE, FL 32095	
TITLE	PRESIDENT	☒ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	TREASURER	☒ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	SECRETARY	☐ Change ☒ Addition
NAME	GRETCHEN BURKS (D)	
STREET ADDRESS	120 STATE RD 312	
CITY-ST-ZIP	ST. AUGUSTINE, FL 32084	
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(j), 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.

SIGNATURE:

Robert A. Eberling, TREASURER

1/11/02

904-824-6111

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (9/01)