

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 26, 2001 8:00 am
Secretary of State

02-26-2001 90527 043 ****61.25

0091594

DOCUMENT # N41501

1. Entity Name

ROTARY CLUB OF HOMESTEAD, INC.

Principal Place of Business

% CHARLES ROWE
1310 N KROME AVE
HOMESTEAD FL 33030-4207

Mailing Address

P O BOX 1215
HOMESTEAD FL 33090

2. Principal Place of Business

3. Mailing Address

PO Box 901215

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Homestead FL

4. FEI Number

59-6155191

Applied For

Not Applicable

Zip

Country

Zip

Country

33090

Dade

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

DO NOT WRITE IN THIS SPACE



6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

ROWE, CHARLES
1310 N KROME AVE
HOMESTEAD FL 33030

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

C. Fordyce
Signature, typed or printed name of registered agent and title if applicable.

C. Fordyce

(NOTE: Registered Agent signature required when reinstating)

2/19/01

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 V
NAME LYNN, SANDRA
STREET ADDRESS 830 NORTH KROME AVENUE
CITY-ST-ZIP HOMESTEAD FL ☒ Delete

TITLE D
NAME MARCUS, MICHAEL
STREET ADDRESS 317 N. KROME AVE
CITY-ST-ZIP HOMESTEAD FL ☒ Delete

TITLE D
NAME MAZURE, PHILIPPE
STREET ADDRESS 125 NE 8TH ST #3
CITY-ST-ZIP HOMESTEAD FL ☐ Delete

TITLE S
NAME WITHERELL, TOM
STREET ADDRESS 974 OLD DIXIE HWY
CITY-ST-ZIP HOMESTEAD FL 33030 ☐ Delete

TITLE D
NAME LOSNER, STEVEN D.
STREET ADDRESS 65 NW 16TH ST
CITY-ST-ZIP HOMESTEAD FL ☐ Delete

TITLE P
NAME GLOSSER, RICHARD
STREET ADDRESS 151 NW 11TH ST SUITE 304
CITY-ST-ZIP HOMESTEAD FL ☒ Delete

TITLE P
NAME Tom Witherall
STREET ADDRESS 974 Old Dixie Hwy
CITY-ST-ZIP Homestead FL 33030 ☒ Change ☐ Addition

TITLE V
NAME Rex Oleson
STREET ADDRESS 31850 SW 195 Ave
CITY-ST-ZIP Homestead FL 33030 ☐ Change ☒ Addition

TITLE S
NAME Fred Waring
STREET ADDRESS 10423 SW 45 Place
CITY-ST-ZIP Miami FL 33176 ☐ Change ☒ Addition

TITLE T
NAME Catherine Fordyce
STREET ADDRESS 18733 SW 293 Ter
CITY-ST-ZIP Homestead FL 33030 ☐ Change ☒ Addition

TITLE D
NAME Philippe Mazure
STREET ADDRESS 125 NE 8 street #3
CITY-ST-ZIP Homestead FL 33030 ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
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 all other like empowered.

SIGNATURE:

C. Fordyce
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/20/01

Date

Daytime Phone #

CR2E037 (10/00)