

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 703310

1. Entity Name

KIWANIS CLUB OF BRADENTON-DESOTO, FLORIDA, INC.

FILED
Feb 04, 2002 8:00 am
Secretary of State

02-04-2002 90123 029 ****61.25

Principal Place of Business

26 T. BAYSHORE WINDMILL VILLAGE
603 63RD AVENUE WEST
BRADENTON FL 34207

Mailing Address

MCRAE, LESLIE
~~1238 56TH ST W~~
BRADENTON FL 34209-4703
US

2. Principal Place of Business

3. Mailing Address

222 OLD MAIN ST

Suite, Apt. #, etc.

Suite, Apt. #, etc.

APARTMENT 102

City & State

City & State

BRADENTON, FL

Zip

Country

Zip

Country

34205

US

4. FEI Number

59-6168897

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

SKARRITT, DONALD H.
603 63RD AVE. W.
BAYSHORE WINDMILL VILLAGE
BRADENTON FL 34207

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

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 NAME STREET ADDRESS CITY-ST-ZIP	P DELPLATO, RACHEL 233 47TH ST. W. BRADENTON FL 34209	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MCRAE, LESLIE 1238 56TH ST W 222 OLD MAIN ST APT 102 BRADENTON FL 34209 34205	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SABATINO, MICHAEL P.O. BOX 14280 N/A BRADENTON FL 34280	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T RADABAUGH, RUSSELL E 1226 56TH ST K1 BRADENTON FL 34209	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D KITZMILLER, ROBERT 1812 76TH ST. N.W. BRADENTON FL 34209	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D TILLIS, THEODORE 3101 9TH AVENUE DR. E. PALMETTO FL 34221	<input type="checkbox"/> Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> 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:

Signature Required Sect. Kiwanis

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

(941) 756-6797

CR2E037 (9/01)