

**2001 UNIFORM BUSINESS REPORT (UBR)**

**FILED**  
**Jan 31, 2001 8:00 am**  
**Secretary of State**

01-31-2001 90302 030 \*\*\*\*61.25

**DOCUMENT # 703680**

1. Entity Name

**KIWANIS CLUB OF SOUTH SARASOTA, INC.**

Principal Place of Business

Mailing Address

**2209 CIRCLEWOOD DR.  
 SARASOTA FL 34231**

**2209 CIRCLEWOOD DR.  
 SARASOTA FL 34231**

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

**59-6168946**

Applied For

Not Applicable

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

**O'HARA, RUSSELL P.  
 2209 CIRCLEWOOD DR.  
 SARASOTA FL 34231**

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: PD  
 NAME: HICKERNELL, WARREN J  Delete  
 STREET ADDRESS: 4799 DOVE TR CT  
 CITY-ST-ZIP: SARASOTA FL 34238

TITLE: PD  
 NAME: CHARUHAS SARA  Change  Addition  
 STREET ADDRESS: 7464 CASS CIRCLE  
 CITY-ST-ZIP: SARASOTA FL 34231

TITLE: VD  
 NAME: CHARUHAS, SARA  Delete  
 STREET ADDRESS: 7464 CASS CIRCLE  
 CITY-ST-ZIP: SARASOTA FL 34231

TITLE: VA  
 NAME: STEVENS ELLEN  Change  Addition  
 STREET ADDRESS: 4760 CENTRAL SARASOTA PKWY  
 CITY-ST-ZIP: SARASOTA FL 34233

TITLE: SD  
 NAME: SCHERTLE, FRANK  Delete  
 STREET ADDRESS: 7515 STARFISH LANE  
 CITY-ST-ZIP: SARASOTA FL

TITLE:  Change  Addition

TITLE: TD  
 NAME: O'HARA, RUSSELL  Delete  
 STREET ADDRESS: 2209 CIRCLEWOOD DR  
 CITY-ST-ZIP: SARASOTA FL

TITLE:  Change  Addition

TITLE:  Delete

TITLE:  Change  Addition

TITLE:  Delete

TITLE:  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: *Russell P. O'Hara* **RUSSELL P. O'HARA** 1/23/01 (941) 944-3921

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (10/00)