2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 707933

KIWANIS CLUB OF GREATER CLEARWATER, INC.



FILED
May 05, 2003 8:00 am §
Secretary of State

05-05-2003 90278 009 ****61.25

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POST OFFICE BOX 8206 POS			Mailing Address POST OFFICE BOX 8206 CLEARWATER FL 34618								
											NI 1880 NO
2. Principal F	Place of Business	3. Mailing	3. Mailing Address								
Suite, Apt.	. #, etc.	Suite,	Suite, Apt. #, etc.				☐ CHECK HERE IF MAKING CHANGES				
City & Stat	te	City &	City & State				4. FEI Number 59-0965990 Applied For Not Applicable				
Zip Country		· Zip	· Zip Co		Country		5. Certificate of	of Status Desi	ired 🗆	\$8.75 Ad	ditional
6. Name and Address of Current R		not Decisioned A	torod Agent						Fee Required ss of New Registered Agent		
	6. Name and Address of Curre	ent Registered A	tgent		Name		7. Name and 7	Address of N	ew negister	reu Agem	
GRÁHAM, JOHN JR					Street Address (P.O. Box Number is Not Acceptable)						
1336 HIG	ähield dr. Ater Fl 34624			}	Street Addi	ress (F	O. Box Number		Jiabie)		
OLD WITH E CHOCK					City FL Zip Code						
9 The above	e named entity submits this statemer	t for the purpose	of changing its r	ocietoros	d office or re-	aistore	ad agent or both	in the State			and accont
	tions of registered agent.	icioi (ile purpose	or changing its i	egisteret	a onice or re-	gistere	ed agent, or both	i, iii tile state	or rionda. 1	aii: (aiiiiilai Witii,	and accept
SIGNATURE .	Structure, typed or printed name of registered as										
	Signature, typed or printed name of registered ag	gent and title if applicab	ole. (NOTE:	Registered a	Agent signature r	required :	when reinstating)		DA	ATE	
	À		• El								
FILE NOW: FEE IS \$61.25 9. Election Campaign F Trust Fund Contribut							\$5.00 May Be Added to Fees	; _F		neck Payable partment of t	
		}						1	ionaa Bc	partitionic or	01010
10.	OFFICERS AND	DIRECTORS		11.		A	DDITIONS/CHA	NGES TO OF	FICERS AND	D DIRECTORS IN	
TITLE	P PLUTCHOK, ADAM J		☐ Delete	TITLE	ľ					☐ Change	☐ Addition
NAME STREET ADDRESS	2853 SUNSET POINT RD			NAME	T ADDRESS						
CITY-ST-ZIP	CLEARWATER FL 33759			CITY-S							
TITLE	D		□ Delete	TITLE						Change	Addition
NAME	WILLIAMS, NAOMI B DR		- Delete	NAME						Onlings	
STREET ADDRESS	1300 RIDGE AVE			STREET	T ADDRESS						
CITY-ST-ZIP	CLEARWATER FL 33755	<u> </u>		CITY-S				·			
TITLE	D.,		- Delete	TITLE		Section 1		, 1	And the second	☐ Change	🔼 Addition
NAME STREET ADDRESS	LORENZ, JERRY 1150 EIGHT AVE. SW			NAME		5-H	رهم مراك	ioeh Joed Dr	_		
CITY-ST-ZIP	LARGO FL 33770			CITY-S			ed n. Fl.				(
TITLE	D		Delete	TITLE		<u>yunt</u> Dire		276 10-	7145	☐ Change	⊠ Addition
NAME .	LAMBERT, DICK		Deserte	NAME	, •		a Fi So	haenla		Change	- 10 amon
STREET ADDRESS	2045 CORONET LANE			STREET	T ADDRESS	24		on Ks	Dr.		{
CITY-ST-ZIP	CLEARWATER FL 34624			CITY-S	ST-ZIP	Jean	water, H.	3376	4-2812		
TITLE	D DELONO E		☐ Delete	TITLE		- •				Change	Addition
NAME .	BELL, DELORIS F			NAME							Ì
STREET ADDRESS CITY-ST-ZIP	1356 TERRACE RD CLEARWATER FL 33755-2058			CITY-S	T ADDRESS ST-ZIP						ļ
TITLE	T 00100-2000		☐ Delete	THLE						☐ Change	
NAME	BARNETT, WILLIAM G III		U Delete	NAME	1					L-1 Ollange	
	1618 KILWINNING CT				T ADDRESS						
CITY-ST-ZIP	PALM HARBOR FL 34684			CITY-S	ST-ZIP	_					ĺ
12 I hereby o	certify that the information supplied y	with this filing doe	e not qualify for t	he evem	ntion stated	lin Sec	tion 119 07(3)(i)	Florida Stati	utae 1 furthar	r portifu that the i	oformation

Thereby verify that the information supplied with this hilling does not quality 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 attachine twith an address, with all other like empowered.