

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

FILED
Apr 21, 2003 8:00 am
Secretary of State

04-21-2003 91204 005 ****61.25

DOCUMENT # 710321

1. Entity Name

KIWANIS CLUB OF MIDTOWN, ST. PETERSBURG, FLORIDA, INC.



Principal Place of Business

**500 94TH AVE N
SAINT PETERSBURG FL 33702**

Mailing Address

**500 94TH AVE N
SAINT PETERSBURG FL 33702**

2. Principal Place of Business

557 Northmoor Av N

3. Mailing Address

557 Northmoor Av N

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

St. Petersburg, FL

City & State

St. Petersburg, FL

Zip

33702

Country

USA

Zip

33702

Country

USA

4. FEI Number **59-0690574**

Applied For

Not Applicable

5. Certificate of Status Desired

☒

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

**SCHATZEL, PETER C
500 94TH AVENUE N
SAINT PETERSBURG FL 33702**

7. Name and Address of New Registered Agent

Name

Richard J. French, Jr.

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

557 Northmoor Av. N.

City

St. Petersburg

FL

Zip Code

33702

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. I am familiar with, and accept the obligations of registered agent.

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
Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE **P** ☐ Delete
NAME **FRENCH, RICHARD**
STREET ADDRESS **557 NORTHMOOR AVE N.**
CITY-ST-ZIP **SAINT PETERSBURG FL 33702**

TITLE **ST** ☒ Delete
NAME **BENTLEY, CURTIS**
STREET ADDRESS **376 18TH AVENUE NE**
CITY-ST-ZIP **SAINT PETERSBURG FL 33704**

TITLE **T** ☒ Delete
NAME **SCHATZEL, PETER**
STREET ADDRESS **500 94 AVENUE N.**
CITY-ST-ZIP **ST. PETERSBURG FL 33702**

TITLE **D** ☐ Delete
NAME **WILKINSON, BARRY**
STREET ADDRESS **696 1ST. AVE. N., STE 201**
CITY-ST-ZIP **SAINT PETERSBURG FL 33701**

TITLE **V** ☐ Delete
NAME **KNOWLES, WILLIAM L.**
STREET ADDRESS **1307-41 AVE. NE**
CITY-ST-ZIP **ST. PETERSBURG FL**

TITLE **D** ☐ Delete
NAME **RICH, ALICE**
STREET ADDRESS **3005 WEST ROBSON STREET**
CITY-ST-ZIP **TAMPA FL 33614**

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE **T** ☒ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **V** ☐ Change ☒ Addition
NAME **Smith, Jamie**
STREET ADDRESS **3864 10th St. NE.**
CITY-ST-ZIP **St Petersburg, FL 33703**

TITLE **D** ☐ Change ☒ Addition
NAME **French, Mary Jo**
STREET ADDRESS **557 Northmoor Av N**
CITY-ST-ZIP **St. Petersburg, FL 33702**

TITLE **S** ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **P** ☒ 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)(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 another like empowered.

SIGNATURE: **Signature Required**

4/16/03

727-522-2111

CR2E037 (10/02)