

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 716837

1. Entity Name

KIWANIS CLUB OF LEHIGH ACRES, FLORIDA, INC.

Principal Place of Business

15 S HOMESTEAD ROAD
LEHIGH ACRES FL 33936

Mailing Address

15 S HOMESTEAD ROAD
LEHIGH ACRES FL 33936

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country

4. FEI Number

59-2526208

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

ANGLICKIS, RICHARD A
643 GRANDVIEW DR.
LEHIGH ACRES FL 33936

7. Name and Address of New Registered Agent

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
After September 12, 2001, min. will be \$236.25

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

TITLE D
NAME LODA, LOU
STREET ADDRESS 1104 E 13TH STREET
CITY-ST-ZIP LEHIGH ACRES FL 33972 ☒ Delete

TITLE D
NAME BOYD, BRUCE JR.
STREET ADDRESS 1802 7TH ST.
CITY-ST-ZIP LEHIGH ACRES FL 33972 ☐ Delete

TITLE D
NAME ANGLICKIS, RICHARD
STREET ADDRESS 643 GRANDVIEW DR
CITY-ST-ZIP LEHIGH ACRES FL 33936 ☐ Delete

TITLE P
NAME BAKER, WILLIAM A
STREET ADDRESS 609 NORTH AVE.
CITY-ST-ZIP LEHIGH ACRES FL 33936 ☐ Delete

TITLE T
NAME OLLIFF, JON R
STREET ADDRESS 210 LAKE AVE NORTH
CITY-ST-ZIP LEHIGH ACRES FL 33972 ☐ Delete

TITLE SD
NAME BROWN, ROBERT
STREET ADDRESS 353 RICHLAND RD
CITY-ST-ZIP LEHIGH ACRES, FL 00000 ☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE D
NAME GERALD Langford
STREET ADDRESS 402 Bethany Village Circle
CITY-ST-ZIP Lehigh Acres, Fla 33936-7622 ☐ Change ☒ Addition

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

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

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ 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:

[Signature] REQUIRED

18 July 01

(941) 344-6336

CR2E037 (5/01)

FILED
Jul 25, 2001 8:00 am
Secretary of State

07-25-2001 90014 032 ****61.25



DO NOT WRITE IN THIS SPACE