

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 721273

1. Entity Name

PALM BEACH KIWANIS CLUB FOUNDATION, INC.

Principal Place of Business

3626 EMBASSY DR  
WEST PALM BEACH FL 33401  
US

Mailing Address

P. O. BOX 694  
PALM BEACH FL 33480-0694

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

6. Name and Address of Current Registered Agent

ISRAEL, GARY  
3626 EMBASSY DR  
~~#400~~  
WEST PALM BEACH FL 33401

4. FEI Number

59-7140041

Applied For  
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

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

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 PD ☒ Delete  
NAME HAUGHTON, DAVID DR  
STREET ADDRESS 232 ROYAL PALM WAY  
CITY-ST-ZIP PALM BEACH FL 33480

TITLE VD ☐ Delete  
NAME SHUGAR, GERALD  
STREET ADDRESS ~~300 SUNSET AVE #116~~ 1515 S. Flagler, #11  
CITY-ST-ZIP PALM BEACH FL 33480 West Palm Beach, FL 33401

TITLE SD ☐ Delete  
NAME HEEKE, SUSAN  
STREET ADDRESS 124 SEABREEZE AVE  
CITY-ST-ZIP PALM BEACH FL 33480

TITLE TD ☐ Delete  
NAME ISREAL, GARY  
STREET ADDRESS 3626 EMBASSY DR  
CITY-ST-ZIP WEST PALM BEACH FL 33401

TITLE D ☐ Delete  
NAME TERZISE, STEVE  
STREET ADDRESS 1750 NORTH FLA. MANGO ROAD, # 401  
CITY-ST-ZIP WEST PALM BEACH FL

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE PD ☒ Change ☐ Addition  
NAME GARY ISRAEL  
STREET ADDRESS 3626 Embassy Drive  
CITY-ST-ZIP West Palm Beach, FL 33401

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

TITLE ☒ Change ☐ Addition  
NAME LINDA Flower  
STREET ADDRESS 3716 Whitehall Drive  
CITY-ST-ZIP West Palm Beach, FL 33401

TITLE ☒ Change ☐ Addition  
NAME TD  
STREET ADDRESS Pamela Starks Thomas  
CITY-ST-ZIP 300 Royal Palm Way  
Palm Beach, FL 33480

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

TITLE ☐ 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 all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #