

# 2001 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Mar 14, 2001 8:00 am**  
**Secretary of State**

03-14-2001 90495 005 \*\*\*\*61.25

**DOCUMENT # 721273**

1. Entity Name

**PALM BEACH KIWANIS CLUB FOUNDATION, INC.**

Principal Place of Business

Mailing Address

3626 EMBASSY DR  
 WEST PALM BEACH FL 33401  
 US

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

**C0033346**



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

**59-7140041**

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

**\$8.75** Additional  
 Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

ISRAEL, GARY  
 3626 EMBASSY DR  
 WEST PALM BEACH FL 33401

Name **Kenneth J. Schrader**

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

**255 South County Rd.**

City

**Palm Beach**

**FL**

Zip Code

**33480**

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

*Kenneth J. Schrader* Treasurer

**3/9/01**

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 ISRAEL, GARY  
 STREET ADDRESS 3626 EMBASSY DRIVE  
 CITY-ST-ZIP WEST PALM BEACH FL 33401 ☒ Delete

TITLE Gerald Shugar  
 NAME 1515 S. Flagler Dr.  
 STREET ADDRESS West Palm Beach, FL 33401 ☐ Change ☒ Addition PD

TITLE VD  
 NAME SHUGAR, GERALD  
 STREET ADDRESS 1515 S FLAGLER PT 11  
 CITY-ST-ZIP WEST PALM BEACH FL 33401 ☒ Delete

TITLE Pamela Stark Thomas  
 NAME 300 Royal Palm Way  
 STREET ADDRESS Palm Beach, FL 33480 ☐ Change ☒ Addition VD

TITLE SD  
 NAME FLOWER, LINDA  
 STREET ADDRESS 3716 WHITEHALL DRIVE  
 CITY-ST-ZIP WEST PALM BEACH FL 33401 ☒ Delete

TITLE Susan Heeke  
 NAME 124 Seabreeze Ave.  
 STREET ADDRESS Palm Beach, FL 33480 ☐ Change ☒ Addition SD

TITLE TD  
 NAME THOMAS, PAMELA STARK  
 STREET ADDRESS 300 ROYAL PALM WAY  
 CITY-ST-ZIP PALM BEACH FL 33480 ☒ Delete

TITLE Kenneth J. Schrader  
 NAME 1612 Bowood Rd.  
 STREET ADDRESS N. Palm Beach, FL 33408 ☐ Change ☒ Addition TD

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

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

TITLE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP ☐ Delete

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:

*Kenneth J. Schrader* Treasurer

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**3/9/01**

Date

**561-820-1070**

Daytime Phone #

CR2E037 (10/00)