

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 728648

1. Entity Name

KIWANIS CLUB OF CORAL SPRINGS - PARKLAND, INC.

Principal Place of Business

Mailing Address

P.O. BOX 8145
CORAL SPRINGS FL 33075-8145

P.O. BOX 8145
CORAL SPRINGS FL 33075-8145

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

23-7347138

Applied For

Not Applicable

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

ROGERS, JOHN ESQ.
1881 UNIVERSITY DR.
CORAL SPRINGS FL 33065

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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	P.	☒ Delete
NAME	SALLY MAZER	
STREET ADDRESS	6846 CALMETTO CIR S 1101	
CITY-ST-ZIP	BOCA RATON FL	
TITLE	D.	☒ Delete
NAME	MUELLER, RICHARD	
STREET ADDRESS	3224 NW 118 LANE	
CITY-ST-ZIP	CORAL SPRINGS FL 33065	
TITLE	S.	☐ Delete
NAME	WILLIAMS, ALEX J. JR.	
STREET ADDRESS	4708 N.W. 60TH LANE	
CITY-ST-ZIP	CORAL SPRINGS FL	
TITLE	D.	☒ Delete
NAME	MCCAULEY, CYNTHIA	
STREET ADDRESS	3000 CORAL HILLS DR.	
CITY-ST-ZIP	CORAL SPRINGS FL 33065	
TITLE	T.	☐ Delete
NAME	JOHN C DOWNS	
STREET ADDRESS	5300 NW 33RD AVE 217	
CITY-ST-ZIP	FT LAUDERDALE FL	
TITLE	D.	☒ Delete
NAME	DIETZ, MARIE	
STREET ADDRESS	10320 NW 43 ST.	
CITY-ST-ZIP	CORAL SPRINGS FL 33065	

TITLE	President	☐ Change ☒ Addition
NAME	Richard Severts	
STREET ADDRESS	1609 N State Rd 7	
CITY-ST-ZIP	Margate FL 33063	
TITLE	VP	☐ Change ☒ Addition
NAME	Ric Stevenson	
STREET ADDRESS	6000 NW 61 St	
CITY-ST-ZIP	Parkland FL 33067	
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	Director	☐ Change ☒ Addition
NAME	William Snyder	
STREET ADDRESS	113 SW 100 Terr	
CITY-ST-ZIP	Coral Springs FL 33071	
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	Director	☐ Change ☒ Addition
NAME	John Rogers	
STREET ADDRESS	1881 N University Dr # 206	
CITY-ST-ZIP	Coral Springs FL 33071	

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: *John Rogers* **SIGNATURE REQUIRED Treasurer** 1/16/00 954 575 3101

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E017 (9/99)

FILED
Jan 22, 2000 8:00 am
Secretary of State

01-22-2000 90073 013 ****61.25



DO NOT WRITE IN THIS SPACE