2000 UNIFORM BUSINESS REPORT (UBR)

SIGNATURE:

DOCUMENT # **761813** Apr 11, 2000 8:00 am Secretary of State 1. Entity Name KIWANIS CLUB OF PABLO, JACKSONVILLE BEACHES, INC 04-11-2000 90219 020 ****70.00 Principal Place of Business Mailing Address P.O. BOX 50503 1600 SHETTER AVE. JACKSONVILLE FL 32240-0503 JACKSONVILLE BCH. FL 32250 2. Principal Place of Business 3. Mailing Address DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. 4. FEI Number Applied For City & State City & State 51-0245558 Not Applicable \$8.75 Additional Zip Country Zip Country 5. Certificate of Status Desired П 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent **GESSELL, LYMAN** VEWOOD 95 ANCILLA CT., PONTE VEDRA BCH, FL 32082 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. April 6, 2000 9. Election Campaign Financing Make Check Payable to FILE NOW: \$5.00 May Be Trust Fund Contribution. Added to Fees Department of State FEE IS \$61.25 OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 11. 10. ☐ Change ☐ Addition ☐ Delete TITLE TITLE HAMILTON, GEORGE NAME NAME STREET ADDRESS STREET ADDRESS 1412 PINEWOOD ROAD CITY-ST-ZIP CITY-ST-ZIP JAX BEACH, FL 00000 32250 ☐ Addition TITLE Delete TITLE ING FRED NAME KING, FRED H NAME STREET ADDRESS STREET ADDRESS **600 PINE STREET** CITY-ST-ZIP CITY-ST-ZIP NEPTUNE BEACH FL 32266 ☐ Addition Delete TITLE TITLE HILLIKER, DARRELL D NAME NAME 95 ANCIZLA STREET ADDRESS 3793 UNION PACIFIC DRIVE EAST STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP JACKSONVILLE FL 32216 ☐ Addition ☐ Delete TITLE TITLE D ZAZZARINO, EDWARD NAME NAME STREET ADDRESS STREET ADDRESS 1895 HICKORY LANE CITY-ST-ZIP CITY-ST-ZIP ATLANTIC BEACH FL 32233 D THORNTON GERTRUDE LE Change 39 FAIRWAY LANE X Delete TITI.E TITLE NAME FREER, PATRICIA NAME STREET ADDRESS STREET ADDRESS 2100 DR. S. #5A TACKEN KILLE, FL. 3220 CITY-ST-ZIP CITY-ST-ZIP JAX BEACH FL 32250 Addition TITLE ■ Delete TITLE VAN WAGNER BURT NAME VAN WAGNER, BURT NAME 1838 CARDINAL COVE STREET ADDRESS STREET ADDRESS **1838 CARDINAL COURT** CITY-ST-ZIP CITY-ST-ZIP JACKSONVILLE BEACH FL 32250 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

(Treasurer) 4/6/00