

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 761813

1. Entity Name

KIWANIS CLUB OF PABLO, JACKSONVILLE BEACHES, INC

FILED

May 03, 2002 8:00 am
Secretary of State

05-03-2002 90028 046 ****61.25

Principal Place of Business

1600 SHETTER AVE.
JACKSONVILLE BCH. FL 32250
US

Mailing Address

P.O. BOX 50503
JACKSONVILLE FL 32240-0503
US

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

51-0245558

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

GEORGEK, HAMILTON SR
1412 PINEWOOD ROAD
JACKSONVILLE BEACH FL 32250-2919

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

T
NAME HAMILTON, GEORGE ☐ Delete
STREET ADDRESS 1412 PINEWOOD ROAD
CITY-ST-ZIP JAX BEACH, FL 00000 32250

P.
NAME VAN WAGNER, BURT ☐ Change ☒ Addition
STREET ADDRESS 1838 CARDINAL COURT
CITY-ST-ZIP JAX BCH, FL. 32250

P
NAME GLENDENNING, JACK ☒ Delete
STREET ADDRESS 3125 COURTNET WOODS CRT
CITY-ST-ZIP JACKSONVILLE FL-32224

P.E.
NAME HOJAK, EMIL ☐ Change ☐ Addition
STREET ADDRESS 1901 NORTH FIRST STREET #604
CITY-ST-ZIP JAX-BCH, FL-32250

S
NAME GESSELL, LYMAN E ☐ Delete
STREET ADDRESS 95 ANCILLA CRT
CITY-ST-ZIP PONTE VEDRA BCH FL 32250

D.
NAME OLSEN, ANNE ☐ Change ☒ Addition
STREET ADDRESS 1101 HAGER DRIVE WEST
CITY-ST-ZIP NEPTUNE BCH, FL. 32266

D
NAME ZAZZARINO, EDWARD ☐ Delete
STREET ADDRESS 1895 HICKORY LANE
CITY-ST-ZIP ATLANTIC BEACH FL 32233

P.
NAME STARKENBURG, CHARLES ☐ Change ☒ Addition
STREET ADDRESS 410 PABLO POINT DRIVE
CITY-ST-ZIP JACKSONVILLE, FL. 32225

D
NAME GERTRUDE, L. THORNTON ☐ Delete
STREET ADDRESS 39 FAIRWAY LANE
CITY-ST-ZIP JACKSONVILLE BEACH FL 32250

D.
NAME ZAZZARINO, ED ☐ Change ☒ Addition
STREET ADDRESS 1895 HICKORY LANE
CITY-ST-ZIP ATLANTIC BCH, FL. 32233

PE
NAME KING, FRED H ☒ Delete
STREET ADDRESS 600 PINE ST
CITY-ST-ZIP NEPTUNE BEACH FL 32266

V.P.
NAME KING, FRED H. ☐ Change ☒ Addition
STREET ADDRESS 600 PINE ST
CITY-ST-ZIP NEPTUNE BEACH, FL. 32266

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:

GEORGEK HAMILTON SR, TREASURER
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

04/19/02 (904) 246-0407
Date Daytime Phone #

CR2E037 (9/01)