

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 762331

1. Entity Name

KIWANIS CLUB OF BAREFOOT BAY, FLORIDA., INC.

**FILED**  
**Jan 28, 2000 8:00 am**  
**Secretary of State**

01-28-2000 90099 032 \*\*\*\*61.25

Principal Place of Business

Mailing Address

1311 W OLEANDER  
BAREFOOT BAY FL 32976  
US

1213 CALUSA DR  
BAREFOOT BAY FL 32976  
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

59-2094324

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

HELEN E JOHNSON  
1213 CALUSA DR  
BAREFOOT BAY FL 32976

Name

JAMES DACE

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

813 S WATERWAY DR

City

BAREFOOT BAY FL

FL

Zip Code, 32976

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.

James C. Dace

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

JAN 15 2000

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 **MEDEIROS, FRANK**  
STREET ADDRESS **1311 W OLEANDER**  
CITY-ST-ZIP **BAREFOOT BAY FL**

TITLE **VD** ☐ Change ☒ Addition  
NAME **CRAIGIE, ROBERT**  
STREET ADDRESS **717 N OLEANDER CIR**  
CITY-ST-ZIP **BAREFOOT BAY FL 32976**

TITLE **VPD** ☒ Delete  
NAME **BOYLE, HERBERT**  
STREET ADDRESS **1218 S WATERWAY**  
CITY-ST-ZIP **BAREFOOT BAY FL**

TITLE **D** ☐ Change ☒ Addition  
NAME **PEARSON, RICHARD**  
STREET ADDRESS **1217 CALUSA DR**  
CITY-ST-ZIP **BAREFOOT BAY FL 32976**

TITLE **D** ☐ Delete  
NAME **RAND, RAND**  
STREET ADDRESS **1216 CALUSE DR**  
CITY-ST-ZIP **BAREFOOT BAY FL**

TITLE **SD** ☒ Change ☐ Addition  
NAME **RAND, PAUL**  
STREET ADDRESS **1216 CALUSA DR**  
CITY-ST-ZIP **BAREFOOT BAY FL 32976**

TITLE **SD** ☐ Delete  
NAME **HELEN E JOHNSON**  
STREET ADDRESS **1213 CALUSA DR**  
CITY-ST-ZIP **BAREFOOT BAY FL**

TITLE **PD** ☒ Change ☐ Addition  
NAME **JOHNSON, HELEN E**  
STREET ADDRESS **1213 CALUSA DR**  
CITY-ST-ZIP **BAREFOOT BAY FL 32976**

TITLE **D** ☐ Delete  
NAME **WESCHLER, EUGENE**  
STREET ADDRESS **1023 ROYAL PALM DRIVE**  
CITY-ST-ZIP **BAREFOOT BAY FL**

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

TITLE **TD** ☐ Delete  
NAME **DREIKSCHAT, ROBERT**  
STREET ADDRESS **604 AMARYLLIS**  
CITY-ST-ZIP **BAREFOOT BAY FL**

TITLE **D** ☒ Change ☐ Addition  
NAME **PREIKSCHAT, ROBERT**  
STREET ADDRESS **604 AMARYLLIS DR**  
CITY-ST-ZIP **BAREFOOT BAY FL 32976**

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: James C. Dace

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

JAN 23 2000

Date

Daytime Phone #

CR2E037 (9/99)