

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 766739

1. Entity Name

CHARLOTTE HARBOR ROTARY FOUNDATION, INC.

Principal Place of Business

Mailing Address

% CHARLOTTE HARBOR YATCH CLUB
4400 LISTER ST
PT CHARLOTTE FL 33952
US

P.O. BOX 510391
PUNTA GORDA FL 33951-0391

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

59-2274640

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

KIRSHY, RUSSELL
4055 TAMiami TRAIL
SUITE A-4
PORT CHARLOTTE FL 33953

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 KELLER, WALLY
STREET ADDRESS 133 SMALL ST.
CITY-ST-ZIP PORT CHARLOTTE FL 33952

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

TITLE VPD ☐ Delete
NAME CARTER, STEPHEN
STREET ADDRESS 4814 JACARANDA HUGH DR.
CITY-ST-ZIP VENICE FL 34293

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

TITLE S ☐ Delete
NAME BASILIO, JOSE
STREET ADDRESS 2539 RIO PALMERO
CITY-ST-ZIP PUNTA GORDA FL 33980

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

TITLE T ☐ Delete
NAME SUNDERAVEL, SELVA
STREET ADDRESS P.O. BOX 381062
CITY-ST-ZIP MURDOCK FL 33938

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

TITLE D ☐ Delete
NAME WILSON, BOB
STREET ADDRESS P.O. BOX 510391
CITY-ST-ZIP PUNTA GORDA FL 33951

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

TITLE D ☐ Delete
NAME MONCK, RON
STREET ADDRESS 1433 KENSINGTON ST.
CITY-ST-ZIP PORT CHARLOTTE FL 33952

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

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 *Wally Keller* REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-25-2000

Date

941 575 5450

Daytime Phone #

CR2E037 (9/99)

FILED
Apr 10, 2000 8:00 am
Secretary of State

04-10-2000 90058 031 ****61.25



DO NOT WRITE IN THIS SPACE