

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 20, 2001 8:00 am
Secretary of State

04-20-2001 90184 050 ****61.25

0073931

DOCUMENT # 766832

1. Entity Name

THE ROTARY CLUB OF WEST BRADENTON, INC.

Principal Place of Business

8008 19TH AVE DR. W
 BRADENTON FL 34209
 US

Mailing Address

P.O. BOX 1671
 BRADENTON FL 34206
 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

59-2282766

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
 Fee Required**

6. Name and Address of Current Registered Agent

**HAMMER, JAMES L.
 8008-19TH AVE.DR.,W.
 BRADENTON FL 34209**

7. Name and Address of New Registered Agent

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 ☒ Delete
 NAME **P**
 STREET ADDRESS **SCALZITTI, KIM**
 CITY-ST-ZIP **2510 11TH AVE W
 BRADENTON FL**

TITLE ☒ Change ☐ Addition
 NAME **Pres.**
 STREET ADDRESS **Bill Diamond**
 CITY-ST-ZIP **216 20th Street W
 Bradenton, FL 34205**

TITLE ☒ Delete
 NAME **V**
 STREET ADDRESS **RICHMOND, JOHN**
 CITY-ST-ZIP **1006 87TH ST NW
 BRADENTON FL**

TITLE ☒ Change ☐ Addition
 NAME **Vice-Pres.**
 STREET ADDRESS **Mark Sticht**
 CITY-ST-ZIP **1665 Laurel Street
 Sarasota, FL 34236**

TITLE ☒ Delete
 NAME **D**
 STREET ADDRESS **MELTON, JOHN**
 CITY-ST-ZIP **204 77TH STREET WEST
 BRADENTON FL 34209**

TITLE ☒ Change ☐ Addition
 NAME **Sec.**
 STREET ADDRESS **Bob Granger**
 CITY-ST-ZIP **4836 Palm Aire Drive
 Sarasota, FL 34243**

TITLE ☒ Delete
 NAME **T**
 STREET ADDRESS **KRAUJALIS, LARRY**
 CITY-ST-ZIP **PO BOX 1342
 BRADENTON FL**

TITLE ☒ Change ☐ Addition
 NAME **Treas.**
 STREET ADDRESS **Jim Hammer**
 CITY-ST-ZIP **8008 19th Ave Dr W
 Bradenton, FL 34209**

TITLE ☒ Delete
 NAME **D**
 STREET ADDRESS **OLCOTT, CYNTHIA**
 CITY-ST-ZIP **3643 CORTEZ ROAD WEST
 BRADENTON FL 34210**

TITLE ☒ Change ☐ Addition
 NAME **D**
 STREET ADDRESS **Tom O'Brien**
 CITY-ST-ZIP **2328 Manatee Ave W
 Bradenton, FL 34205**

TITLE ☒ Delete
 NAME **D**
 STREET ADDRESS **GEIGER, WILBER**
 CITY-ST-ZIP **1401 MANATEE AVENUE WEST
 BRADENTON FL 34205**

TITLE ☒ Change ☐ Addition
 NAME **D**
 STREET ADDRESS **Mark Latham**
 CITY-ST-ZIP **13520 2nd Ave NE
 Bradenton, FL 34202**

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:

Bob Granger

4/13/01

941/351-8104

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (10/00)