	UNIFORM BUSI		RT (UBI	 -	FILED 05, 2001 08:0	0 AM	
DOCUMENT # N08522 1. Entity Name KIWANIS CLUB OF BRADENTON-SUNRISE, INC.					ecretary of S		
Principal Place C/O SUNRISE F P O BOX 1697 BRADENTON 34206		Mailing Address C/O SUNRISE KIWANIS P O BOX 1697 BRADENTON 34206	FL	-			
	ace of Business	3. Mailing Address		<u>.</u>		-	
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			DO NOT WRITE IN THIS SPACE		
City & State	3	City & State	AR . 14	4. FEI Numb	er	 	oplied For
Zip	Country	Zip	Country	5. Certificate	of Status Desired	\$8.75 Add	ditional
	6. Name and Address of Current F	Registered Agent		7. Name and	Address of New Registers	d Agent	
ROBERGE ROGER 5716 1ST AVE W				Name Street Address (P.O. Box Number is Not Acceptable)			
BRADENTON FL 34209 US			City	ity FL Zip Code			
	named entity submits this statement for					'L	
SIGNATURE _	Signature, typed or printed name of registered agent a	9. Election Campaign I	Financing	ure required when reinstating)	DAT	k Payable to	
40	FEE IS \$61.25	Trust Fund Contribut		Added to Fees		ent of State	
TITLE	OFFICERS AND DIR	Delete	11. TITLE	SD ADDITIONS/CH	IANGES TO OFFICERS AND		
NAME STREET ADDRESS	VAN BERKEL JOHN 1001 COLUMBIA DRIVE	□ Delete	NAME STREET ADDRESS	GAUDIO RON 206 2ND STREET EAS		X Change	☐ Addition
CITY-ST-ZIP	BRADENTON	FL 34209	CITY-ST-ZIP	BRADENTON	FL .	34208	
TITLE NAME STREET ADDRESS	D HATCHER BEN 7702 16TH AVE., N.W.	☐ Delete	TITLE NAME STREET ADDRESS	D		☐ Addition	
CITY-ST-ZIP	BRADENTON	FL 34209	CITY-ST-ZIP	BRADENTON	FL	34202	
TITLE	TD	☐ Delete	TITLE			Change	☐ Addition
NAME STREET ADDRESS	ROBERGE ROGER 4913 29TH AVE DR W		NAME STREET ADDRESS				
CITY-ST-ZIP	BRADENTON	FL	CITY-ST-ZIP				
TITLE NAME STREET ADDRESS	D GOODSON DANIEL 611 19TH ST W	☐ Delete	TITLE NAME STREET ADDRESS	D QUESENBERRY 5901 35TH AVENUE V	STEVE WEST	X Change	Addition
CITY-ST-ZIP	BRADENTON	FL_	CITY-ST-ZIP	BRADENTON	FL	34209	
TITLE NAME STREET ADDRESS		☐ Delete	TITLE NAME STREET ADDRESS			Change	☐ Addition
CITY-ST-ZIP TITLE NAME		☐ Delete	CITY-ST-ZIP TITLE			☐ Change	☐ Addition

12. I hereby certify that the information supplied with this filling 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.

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS

CITY-ST-ZIP

Roger Roberge

TD

07/05/2001

CR2E037 (11/00)