

2001 UNIFORM BUSINESS REPORT (UBR)

FILED

Feb 02, 2001 8:00 am
Secretary of State

02-02-2001 90312 008 ****61.25

DOCUMENT # N09513

1. Entity Name

KIWANIS CLUB OF EUSTIS, FLORIDA, INC.

Principal Place of Business

Mailing Address

P.O. BOX 1225
EUSTIS FL 32727-1600

P.O. BOX 1225
EUSTIS FL 32727-1600

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

59-2353142

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

**HOLTZCLAW, RACHEL
66 W SEMINOLE AVE.
EUSTIS FL 32726**

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
NAME
STREET ADDRESS
CITY-ST-ZIP
**P
HARRY, RICHARD
1014 WOODWARD OAKS CIRCLE
EUSTIS FL 32726-7912** ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**MOLLEN, ROBERT
PRESIDENT
PO Box 1493
EUSTIS, FL 32727-1493** ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**T
HOLTZCLAW, RACHEL
66 W SEMINOLE AVE.
EUSTIS FL 32726** ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**TREASURER
FREEMAN, CYNTHIA
1403 ALFRED #104
TAVARES, FL 32778** ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**S
JIRIK, EDWARD F.
31750 TROPICAL SHORES DRIVE
TAVARES FL 32778** ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**SECRETARY
RICHARD NOLAN
3741 Vindale Rd
TAVARES, FL 32778** ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**VP
REYNOLDS, SUZANNE
1111 LAKESHORE DR/FAIR OAKS 9-6
EUSTIS FL 32726** ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**DIRECTOR
HOLTZCLAW, RACHEL
66 W. Seminole Ave
Eustis, FL 32726** ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D
FREEMAN, CINDY
1402 ALFRED #104
TAVARES FL 32778** ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**DIRECTOR
Reynolds, Suzanne
1111 Lakeshore Dr/Fair Oaks B-6
Eustis, FL 32726** ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D
SCHMIDT, WILLIAM
2727 S GROVE ST.
EUSTIS FL 32726** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**DIRECTOR
← (SAME)** ☐ Change ☐ Addition

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: *Cynthia Freeman*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-9-01 352-742-6313

Date

Daytime Phone #

CR2E037 (10/00)