

# 2001 UNIFORM BUSINESS REPORT (UBR)

FILED

Jan 26, 2001 8:00 am  
Secretary of State

01-26-2001 90059 030 \*\*\*\*61.25

DOCUMENT # N10507

1. Entity Name

KIWANIS CLUB OF CAPE CORAL-NORTH, INC.

Principal Place of Business

1714 CAPE CORAL PARKWAY  
C/O RICHARD V.S. ROOSA  
CAPE CORAL FL 33904

Mailing Address

1714 CAPE CORAL PARKWAY  
C/O RICHARD V.S. ROOSA  
CAPE CORAL FL 33904

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

59-2481371

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

ROOSA, RICHARD V.S.  
1714 CAPE CORAL PARKWAY  
CAPE CORAL FL 33904

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  
S  
~~RINEHOLD, JANE M~~  
5001 RIVERSIDE DR.  
CAPE CORAL FL 33904 ☒ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
V.P.  
VAN CLEVE, VERSIE  
4212 UTE COURT  
ESTERO, FL 33928 ☐ Change ☒ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
T  
ROOSA, RICHARD  
1714 CAPE CORAL PARKWAY  
CAPE CORAL FL 33904 ☐ Delete

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

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
VP  
PROCTOR, NORMA  
3816 SE 18TH PL.  
CAPE CORAL FL 33904 ☐ Delete

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

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
D  
~~CHURCH, JIM~~  
4007 SUNSET CT  
CAPE CORAL FL 33904 ☒ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
~~RINEHOLD, JANE M~~  
KLINE, ROBERT  
2928 SE. 20th AVE  
CAPE CORAL FL 33904 ☐ Change ☒ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
P  
DEFINIS, ROBERT  
3109 SE 5TH CT.  
CAPE CORAL FL 33904 ☐ Delete

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

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
D  
ROTINO, TONY  
738 SHARAK CT  
CAPE CORAL FL 33904 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ 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 another like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

1/8/01 944 542 4733

CR2E037 (10/00)