2002 UNIFORM BUSINESS REPORT (UBR)

Aug 21, 2002 8:00 am Secretary of State **DOCUMENT # N10507** 1. Entity Name 08-21-2002 90093 014 ****61.25 KIWANIS CLUB OF CAPE CORAL-NORTH, INC. Principal Place of Business Mailing Address 1714 CAPE CORAL PARKWAY 1714 CAPE CORAL PARKWAY C/O RICHARD V.S. ROOSA C/O RICHARD V.S. ROOSA CAPE CORAL FL 33904 CAPE CORAL FL 33904 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 59-2481371 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) ROOSA, RICHARD V.S. 1714 CAPE CORAL PARKWAY CAPE CORAL FL 33904 City 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE After September 13, 2002, 9. Election Campaign Financing Make Check Payable to \$5.00 May Be min. will be \$236.25. Trust Fund Contribution. Added to Fees **Department of State** 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 TITLE ☐ Delete TITI F Change ☐ Addition NAME van Cleve, Versie NAME STREET ADDRESS **4212 UTE CT** STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ESTERO FL 33928 TITLE ☐ Delete ☐ Change ☐ Addition NAME ROOSA, RICHARD STREET ADDRESS STREET ADDRESS 1714 CAPE CORAL PARKWAY CJTY-ST-ZiP CITY-ST-ZIP CAPE CORAL-FL 33904 TITLE Delete ☐ Change ☐ Addition NAME PROCTOR, NORMA NAME STREET ADDRESS STREET ADDRESS 3816 SE 18TH PL. CITY-ST-7IP CITY-ST-ZIP <u>Cape Coral FL 33904</u> ☐ Delete TITLE ☐ Change ■ Addition NAME NAME KLINE, ROBERT STREET ADDRESS STREET ADDRESS 2928 SE 20TH AVE CITY-ST-ZIP CITY-ST-ZIP CAPE CORAL FL 33904 TITLE ☐ Delete TITLE Change Addition NAME **DEFINIS, ROBERT** NAME STREET ADDRESS 3109 SE 5TH CT. STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP CAPE CORAL FL 33904 TITLE ☐ Delete TITLE ☐ Change Addition NAME ROTINO, TONY NAME

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.

REQUIRED

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE:

738 SHARAK CT

CAPE CORAL FL 33904

STREET ADDRESS

CITY-ST-ZIP

Alsfor (441) 542-4777

FILED