1/31

# 2002 UNIFORM BUSINESS REPORT (UBR)

**FILED**
**Mar 12, 2002 8:00 am**
**Secretary of State**
01-30-2002 90160 032 ****61.25

DOCUMENT # N20475

1. Entity Name
PERRY KIWANIS CLUB, INC.

| Principal Place of Business | Mailing Address |
|---|---|
| PO BOX 911<br>PERRY FL 32347 | PO BOX 911<br>PERRY FL 32347 |

DO NOT WRITE IN THIS SPACE

| 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 59-6151479 ☐ 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 |
|---|---|
| FALTIN CHARLES F.<br>213 PINELAND<br>PERRY FL 32348 | Name Gilbert-Williams<br>Street Address (P.O. Box Number Is Not Acceptable)<br>810 Southwood Drive<br>City Perry, FL Zip Code 32348 |

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 Gilbert Williams Gilbert Williams Trees 1/15/02
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<br>BAKER, GLENN<br>RT 4 BOX 526-5<br>PERRY FL 32347 | ☒ Delete | S<br>Jan Hopkins<br>1272 Langford Lane<br>Perry, FL 32348 | ☐ Change ☒ Addition |
| TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | PE<br>BETHEM, CLAYTON W<br>6369 HWY 19 S<br>PERRY FL 32348 | ☐ Delete | P<br>Bethea, Clay<br>6369 Hwy 19 S<br>Perry, FL 32348 | ☒ Change ☐ Addition |
| TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | D<br>BASSETT, JAMES, JR.<br>127 SPRINGHILL RD.<br>PERRY FL 32347 | ☐ Delete | | ☐ Change ☐ Addition |
| TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | T<br>FALTIN CHARLES<br>110 RIDGE ROAD.<br>PERRY FL | ☒ Delete | D<br>McKnight, Jim<br>407 E Ash St<br>Perry, FL 32347 | ☐ Change ☒ Addition |
| TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | D<br>CHILDS, ROBERT<br>116 PINE TREE ROAD<br>PERRY FL | ☐ Delete | | ☐ Change ☐ Addition |
| TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | P<br>WILLIAMS, GILBERT<br>1402 S JEFFERSON ST<br>PERRY FL 32348 | ☐ Delete | T<br>Williams, Gilbert<br>810 Southwood Drive<br>Perry, FL 32348 | ☒ Change ☐ Addition |

CR2E037 (9/01)

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:** SIGNATURE Gilbert Williams 1/15/02 850-584-3002
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #