

# 2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**May 05, 2003 8:00 am**  
**Secretary of State**

05-05-2003 90213 020 \*\*\*\*61.25

**DOCUMENT # N23325**

1. Entity Name

**KIWANIS CLUB OF FORT LAUDERDALE-CORAL RIDGE, INC**



Principal Place of Business

**5800 NE 21 TER  
FORT LAUDERDALE FL 33308-2520**

Mailing Address

**5800 NE 21 TER  
FORT LAUDERDALE FL 33308-2520**

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 **59-6168908**

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

**HARRIS, HUGH  
5800 NE 21ST TERR  
FORT LAUDERDALE FL 33308-2520**

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. 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

**FILE NOW: FEE IS \$61.25**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

**Make Check Payable to  
Florida Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE **PD** ☐ Delete  
NAME **GOLDSTEIN, MICHAEL**  
STREET ADDRESS **1975 E. SUNRISE BLVD STE., #607**  
CITY-ST-ZIP **FORT LAUDERDALE FL 33304-1453**

TITLE **D** ☐ Change ☒ Addition  
NAME **LARRY ROGERS**  
STREET ADDRESS **301 N. E. 38 STREET**  
CITY-ST-ZIP **OAKLAND PARK, FL 33334-2225**

TITLE **SD** ☐ Delete  
NAME **HARRIS, HUGH L.**  
STREET ADDRESS **5800 NE 21 TERRACE**  
CITY-ST-ZIP **FT. LAUDERDALE FL**

TITLE **D** ☐ Change ☒ Addition  
NAME **CARYL STEVENS**  
STREET ADDRESS **1311 N. E. 42 STREET**  
CITY-ST-ZIP **OAKLAND PARK, FL 33334-4660**

TITLE **D** ☐ Delete  
NAME **MACLAREN, NEIL**  
STREET ADDRESS **1861 SW 6TH AVE**  
CITY-ST-ZIP **POMPANO BEACH FL 33060-9019**

TITLE **DAY** ☐ Change ☒ Addition  
NAME **LAYNE WALLS**  
STREET ADDRESS **1921 N. E. 31 STREET**  
CITY-ST-ZIP **OAKLAND PARK, FL ###)\*-%%\$%**

TITLE **D** ☐ Delete  
NAME **MURRAY, LOUIS**  
STREET ADDRESS **2940 NW 6TH TERR**  
CITY-ST-ZIP **FORT LAUDERDALE FL 33311-2425**

TITLE **D** ☐ Change ☒ Addition  
NAME **KATIE FREEMAN**  
STREET ADDRESS **3443 N. E. 3 AVENUE**  
CITY-ST-ZIP **OAKLAND PARK, FL 33334-2156**

TITLE **T** ☐ Delete  
NAME **NORWOOD, REBECCA**  
STREET ADDRESS **4060 NW 19 TERRACE**  
CITY-ST-ZIP **OAKLAND PARK FL 33309**

TITLE **D** ☐ Change ☒ Addition  
NAME **MARIBETH KRAFT**  
STREET ADDRESS **701 N. E. 39 STREET**  
CITY-ST-ZIP **OAKLAND PARK, FL 33334-2954**

TITLE **D** ☐ Delete  
NAME **DATO, LEE**  
STREET ADDRESS **5458 NW 45TH WAY**  
CITY-ST-ZIP **COCONUT CREEK FL 33073**

TITLE **D** ☐ Change ☒ Addition  
NAME **SANDRA BARRY**  
STREET ADDRESS **2011 N. E. 52 STREET**  
CITY-ST-ZIP **FT LAUDERDALE, FL 33308-3704**

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:

**REQUIRED**

HUGH L. HARRIS

4/30/03

954 491 2586

CR2E037 (10/02)