

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

FILED
Sep 12, 2003 8:00 am
Secretary of State

0013820

DOCUMENT # **N26382**

1. Entity Name

BARTOW KIWANIS FOUNDATION, INCORPORATED



09-12-2003 90101 011 ****61.25

Principal Place of Business

**BARTOW KIWANIS CLUB
PO BOX 1021
BARTOW FL 33830
US**

Mailing Address

**BARTOW KIWANIS CLUB
PO BOX 1021
BARTOW FL 33830
US**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country



CHECK HERE IF MAKING CHANGES

4. FEI Number **NOT APPLICABLE**

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

**MEYER, JAMES R.
225 S. CENTRAL AVE.
BARTOW FL 33830**

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
After September 10, 2003, min will be \$236.25**

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	NAME	STREET ADDRESS	CITY-ST-ZIP	DELETE	TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	CHANGE	ADDITION
	D	JOHNSON, W. FRANK	6027 YARBOROUGH LANE LAKELAND FL	<input checked="" type="checkbox"/>		✓	JOHN LANGFORD	1250 SCOTTSLAND DR. LAKELAND, FL 33813-3741	<input type="checkbox"/>	<input checked="" type="checkbox"/>
	D	MEYER, JAMES R.	225 S. CENTRAL AVE. BARTOW FL	<input checked="" type="checkbox"/>		✓	KEITH MILLER	755 S. BROADWAY AVE BARTOW, FL 33830-5602	<input type="checkbox"/>	<input checked="" type="checkbox"/>
	D	FRY, C.R.	4405 STATE ROAD 60 EAST BARTOW FL	<input checked="" type="checkbox"/>		S	TIM BROOKS	1280 S. FIRST ST. BARTOW, FL 33830	<input type="checkbox"/>	<input checked="" type="checkbox"/>
	T	MITCHELL, DAVID JR.	1655 S. WALLACE AVE BARTOW FL	<input checked="" type="checkbox"/>		T	BRIAN HINTON	220 E. MAIN ST. BARTOW, FL 33830	<input type="checkbox"/>	<input checked="" type="checkbox"/>
	T	CLARK, DAN	2048 WISTERIA LANE LAKELAND FL 33813	<input type="checkbox"/>		P	DAN CLARK	2048 WISTERIA LANE LAKELAND, FL 33813	<input checked="" type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>					<input type="checkbox"/>	<input type="checkbox"/>

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 empowers.

SIGNATURE:

SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CP2E037 (4/03)

9-6-03