2001 UNIFORM BUSINESS REPORT (UBR)

May 15, 2001 8:00 am Secretary of State DOCUMENT # N32875 1. Entity Name 05-15-2001 90186 030 ****61.25 LAKELAND KIWANIS FOUNDATION, INC. Principal Place of Business Mailing Address PO BOX 2294 5015 S FLORIDA AVE 00052771LAKELAND FL 33806 LAKELAND FL 33813 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 59-2965158 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired П 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) MADDEN, ROBERT L 5015 SOUTH FLORIDA AVE SUITE 409 LAKELAND FL 33813 Zip Code City 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 DATE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) Make Check Payable to FILE NOW: 9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. \Box **Department of State** Added to Fees FEE IS \$61.25 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 11. 10. SD Addition Delete TITLE TITLE CANTRALL, MATTHEW NAME ZIMMERMANN, G F III NAME 1829 E. EDGEWOOD DA. STREET ADDRESS STREET ADDRESS 203 KERNEYWOOD CITY-ST-ZIP LAKELAND, FL 33803 CITY-ST-ZIP LAKELAND FL 33803 **Addition** Change TITLE M Delete TITLE NUNEZ, CHARLES BII E. MAIN STREET NAME NAME LEE, JACK C STREET ADDRESS STREET ADDRESS 100 S. KENTUCKY AVENUE LAKELAND, FL 33801 CITY-ST-ZIP CITY-ST-ZIP LAKELAND FL 33801 Change ☐ Addition TITLE □ Delete TITLE MADDEN, ROBERT L MADDEN, ROBERT L NAME 5015 S.FLORIDA AVE, SUITE #409 STREET ADDRESS STREET ADDRESS 2426 JONILA LAKELAND, FL 338/3 CITY-ST-7IP CITY-ST-ZIP LAKELAND FL 33803 ☐ Change **Addition** Delete TITLE PHILIPSON, CAROLE NAME ROBERTS, J H JR. 1324 LAKELAND NILLS BLVD. STREET ADDRESS 1446 OAKLAWN PLACE STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP LAKELAND, FL 33804 LAKELAND FL 33803 Delete Change 🔀 Addition TITLE TITLE SMITH, KARIN DAY SOO9 HANOVER LANE LAKELAND, FL 33813 MOTTERN, RICHARD C SR. NAME STREET ADDRESS STREET ADDRESS 6972 HAYTER DRIVE CITY-ST-ZIP CITY-ST-ZIP LAKELAND FL 33813 **X** Addition Delete TITLE Change TITLE NAME FARNSWORTH, JAMES L NAME STREET ADDRESS STREET ADDRESS 121 SHADOW LANE CITY-ST-ZIP <u>33801</u> LAKELAND FL 33813

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 report 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 atta SIGNATURE

FILED