

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

**FILED**  
**Apr 25, 2003 8:00 am**  
**Secretary of State**

04-25-2003 90272 018 \*\*\*\*61.25

**DOCUMENT # N32875**

1. Entity Name

**LAKELAND KIWANIS FOUNDATION, INC.**



Principal Place of Business

**5015 S FLORIDA AVE  
409  
LAKELAND FL 33813**

Mailing Address

**PO BOX 2294  
LAKELAND FL 33806**

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 **59-2965158**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional  
Fee Required**

☐ CHECK HERE IF MAKING CHANGES



6. Name and Address of Current Registered Agent

**MADDEN, ROBERT L  
5015 SOUTH FLORIDA AVE SUITE 409  
LAKELAND FL 33813**

7. Name and Address of New Registered Agent

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 NAME STREET ADDRESS CITY-ST-ZIP	<b>D</b> <b>CANTRALL, MATTHEW</b> <b>1829 E EDGEWOOD DRIVE</b> <b>LAKELAND FL 33803</b>	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D</b> <b>NUNEZ, CHARLES</b> <b>811 E MAIN STREET</b> <b>LAKELAND FL 33801</b>	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>PD</b> <b>MADDEN, ROBERT L</b> <b>5015 S FLORIDA AVENUE, SUITE 409</b> <b>LAKELAND FL 33813</b>	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>VPD</b> <b>PHILIPSON, CAROLE</b> <b>1324 LAKELAND HILLS BLVD</b> <b>LAKELAND FL 33804</b>	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>TD</b> <b>MCKNIGHT, KARIN D</b> <b>5009 HANOVER LANE</b> <b>LAKELAND FL 33813</b>	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D</b> <b>SPERRY, KATHLEEN</b> <b>35 LAKE MORTON DRIVE</b> <b>LAKELAND FL 33801</b>	<input checked="" type="checkbox"/> Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D, VP</b> <b>Change</b> <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D, T</b> <b>Change</b> <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D, S</b> <b>Change</b> <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>RD HEACOCK</b> <b>129 S. FLORIDA AVE, SUITE 400</b> <b>LAKELAND, FL 33801</b> <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D</b> <b>RICE, TIMOTHY</b> <b>865 CREATIVE DRIVE</b> <b>LAKELAND, FL 33813</b> <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition

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:

**Robert L. Madden** **Robert L. Madden** **4/22/03 (863)648-1001**

CR2E037 (10/02)