

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N35302

1. Entity Name

KIWANIS CLUB OF FRIENDSHIP OF OCALA, INC.

FILED
Mar 20, 2000 8:00 am
Secretary of State

03-20-2000 90029 049 ****61.25

Principal Place of Business

Mailing Address

8375 SW HWY 200
COMMUNITY RM. 2ND FL
OCALA FL 34481
US

PAUL SHAERER
9015 A SW 94TH ST
OCALA FL 34481-7439
US

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

59-3078265

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

SHAERER, PAUL S
9015 A SW 94TH ST
OCALA FL 34481

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.

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
Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE PD
NAME TREMEWEN, KENNETH
STREET ADDRESS 8016 SW 116TH LOOP
CITY-ST-ZIP OCALA FL 34476 ☒ Delete

TITLE PD
NAME HENRY HANSCOM
STREET ADDRESS 8075 S.W. 116TH LOOP
CITY-ST-ZIP OCALA, FL 34481 ☐ Change ☐ Addition

TITLE T
NAME RECKDENWALD, MARTI
STREET ADDRESS 7927 S.W. 12TH CIR.
CITY-ST-ZIP OCALA FL 34480 ☒ Delete

TITLE TD
NAME JIM ASHTON
STREET ADDRESS 8236 S.W. 115TH ST
CITY-ST-ZIP OCALA, FL. 34481 ☐ Change ☐ Addition

TITLE S
NAME SHAERER, PAUL S
STREET ADDRESS 9015 A SW 94TH ST
CITY-ST-ZIP OCALA FL ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE VD
NAME TREMEWEN, KENNETH
STREET ADDRESS 8075 SW 116TH LOOP
CITY-ST-ZIP OCALA FL ☒ Delete

TITLE VO
NAME BOB KEYSER
STREET ADDRESS 7088 S.W. 115TH LOOP
CITY-ST-ZIP OCALA, FL. 34481 ☐ Change ☐ Addition

TITLE V
NAME NORRIS, JIM
STREET ADDRESS 8094 S.W. 116TH LOOP
CITY-ST-ZIP OCALA FL ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE D
NAME RUSHLOW, KATHY
STREET ADDRESS 627 NE 45TH CT.
CITY-ST-ZIP OCALA FL 34475 ☒ Delete

TITLE D
NAME BOB EANEW
STREET ADDRESS 3016 S.W. 34TH TER.
CITY-ST-ZIP OCALA, FL. 34474 ☐ Change ☐ 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: PAUL SHAERER, SECRETARY 3-7-2000 352-873-3822
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

N35302

922552

BLOCK 11 CONTINUED

D. GEORGE HYDE
7696 S.W. 102ND Loo
OCALA, FL. 34474

V.

KEN JOHNSON

7121 S.W. 113TH Loo
OCALA, FL. 34476

D.

DWIGHT MENTZER
12182 N. MAGNOLIA AVE.
OCALA, FL. 34475