

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

FILED
Jan 17, 2003 8:00 am
Secretary of State

01-17-2003 90098 031 ****61.25

DOCUMENT # N48796

1. Entity Name

KIWANIS CLUB OF BOCA RATON-SUNRISE, INC.



Principal Place of Business

**5340 NW 2ND AVENUE
APT #420
BOCA RATON FL 33487
US**

Mailing Address

**POST OFFICE BOX 1545
BOCA RATON FL 33429
US**

2. Principal Place of Business

99 FAHAM E

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

DEERFIELD BEACH FL

City & State

Zip

33442

Country

U.S.

Zip

Country

4. FEI Number **59-6168896**

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

**MICHAEL, HARRY
9551 PARKVIEW AVE
BOCA RATON FL 33428**

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

James L. Shriner

JAMES L. SHRINER PD

1/15/03

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

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD SMITH, MEL 5340 NW 2ND AVE #420 BOCA RATON FL 33487	☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD MICHAEL, HARRY 9551 PARKVIEW AVE BOCA RATON FL 33428	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD HOWELL, BOB 899 SW 16 ST. BOCA RATON FL 33486-6904	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD JAMES SHRINER 98 FAHAM E DEERFIELD BEACH, FL 33442	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ 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:

Bob Howell **BOB HOWELL TD** **1/15/03** **(561) 394-2671**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E037 (10/02)