

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N49724

1. Entity Name

KIWANIS CLUB OF PALM BEACH GARDENS, FLORIDA, INC

FILED
May 16, 2000 8:00 am
Secretary of State

05-16-2000 90099 020 ****61.25

Principal Place of Business 4655 SQUARE LAKE DR. PALM BEACH GARDENS FL 33418	Mailing Address 4655 SQUARE LAKE DR. PALM BEACH GARDENS FL 33418-6181
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2. Principal Place of Business Suite, Apt. #, etc.	3. Mailing Address Suite, Apt. #, etc.
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City & State	City & State
Zip	Country

4. FEI Number 65-0349489	Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	



DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

HILLS, DAVE
 4655 SQUARE LAKE DR.
 PALM BEACH GARDENS FL 33418

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.

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
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10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	P ROULIS, JUDY 4400 PGA BLVD., #501 PALM BEACH GARDENS FL 33410 ☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V HOGAN, MARGIE 4400 PGA BLVD., #700 PALM BCH GARDENS FL 33410 ☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T HALIFAX, CLARK C 8537 159TH CRT., NORTH PALM BCH GARDENS FL 33418 ☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D HORNIMAN, JACK 304 GOLFVIEW RD., #403E NORTH PALM BEACH FL 33408 ☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MANZO, DEBORAH 340 OCEAN DR. JUNO BCH FL 33408 ☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D DARLING, PAT 2700 PGA BLVD. PALM BEACH GA ☒ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

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 CLARK, HALIFAX C *(Name Correction only)
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 D MILLER, MORRIS 11382 Prosperity Farms Rd #227 Palm Bch Gardens, FL 33410

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(b), 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: DAVID A. HILLS, SEC'y APR 28, 2000 (561) 626-5679
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #