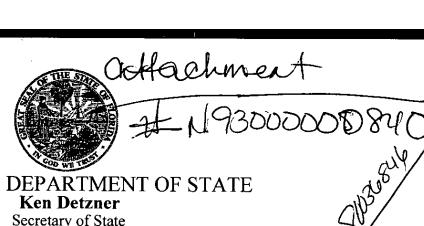
2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

SIGNATURE:

FILED Feb 21, 2003 8:00 am Secretary of State

1. Entity N	JMENT # N9300 (S CLUB OF THE UNIVERSITY					02-21-2003	90836 005	****61.25
Principal Place of Business 10425 SW 48 PL GAINESVILLE FL 32908 US		Mailing Address 10425 SW 48 PL GAINESVILLE FL 32608 US			·			
2. Principa	Place of Business	3. Mailing Address		· · · · · · · · · · · · · · · · · · ·				
Suite, Apt. #, etc.		Suite, Apt. #, etc.			_		ann anns anint (Dil)	ar411 88H (88)
City & State		City & State			CHECK HERE IF MAKING CHANGES 4. FEI Number 59-6153456 Applied For			
Zip	Country	Zip	Country .		5. Certificate of St	· · · · · · · · · · · · · · · · · · ·	~ \$8:75-A	Not Applicable
	6. Name and Address of Current	Registered Agent				ress of New Registe	Fee Requi	red
WARD, JOHN F			Name	_Name				
10425 \$	JOHN F SW 48 PLACE JLLE FL 32608		Street	Address (F	P.O. Box Number is N	Not Acceptable)		·
	ILLE PE SEONO		City		<u> </u>		FL Zip Co	de
6. The above the obligation	e named entity submits this statement for ations of registered agent.	or the purpose of changing its n	egistered office (or registere	ed agent, or both, in	the State of Florida. I	am familiar with	, and accept
SIGNATURE	Signature, typed or printed name of registered egent	and title if applicable. (NOTE:	Registered Agent signa	ture required w	vhen reinstating)	DA	ATE	
10.	FILE NOW: FEE IS \$61.25	9. Election Carry Trust Fund Co	ntribution.	:	\$5.00 May Be - Added to Fees	Florida De	eck Payable partment of	State
TITLE	10	Delete	11.	<u> </u>	ODITIONS/CHANGE	S TO OFFICERS AND		
IAME STREET ADDRESS CITY-ST-ZIP	WARD, JOHN F 10425 SW 48TH PL GAINESVILLE FL		NAME STREET ADDRESS CITY-ST-ZIP			- · · · · · · · · · · · · · · · · · · ·	☐ Change	
ITLE IAME	D Ward, Dean	□ Delete	TITLE NAME	P			Change	☐ Addition
TREET ADDRESS	2234 SE 41 AVENUE GAINESVILLE FL 32641		STREET ADDRESS CITY-ST-ZIP			e de la companya de l		
ITLE IAME ITREET ADDRESS ITY-ST-ZIP	RAMOS, RUBEN 2500 NW 50 PLACE GAINESVILLE FL 32605	Delate	NAME SIREET ADDRESS CITY-ST-ZIP	Ð		- Sagarit	Change —	[Addition -
TLE AME REET ADORESS TY-ST-ZIP	D BELTZ, BILLY 23905 NW 110 AVE ALACHUA FL 32605	☐ Celete	TITLE NAME STREET ADDRESS CITY-ST-ZIP				☐ Change	☐ Addition
TLE AME REET AODRESS TY-ST-ZIP	D WOOD, ASHLEY PO BOX 22 EVINSTON FL 32633	Delete	TITLE . NAME STREET ADDRESS CITY-ST-ZIP		E 13 3 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5		Change	Addition
ILE ME REET ADDRESS IY-ST-ZIP 4	BARTLETT, PATRICIA 31015 W 1ST WAY GAINESVILLE FL 32601-9034	☐ Delete	TITLE NAME		4 7 80 8 80 9	regeração de Argania d	The Change (Addition
2. I hereby condicated of the corp changed.	ertify that the information supplied with to on this report or supplemental report is to ocration or the receiver or trustee empov or on an attachment with an address with	his filing does not qualify for the rue and accurate and that ry's seried to execute this report is run all other like empowered.	required by Char	ed in Section we the sam oter 617, Fig.	on 119.07(3)(i). Floric legal effect as if m orida Statutes; and the	nat my name appears	ertify that the int l'ain an officer of in Block 10 or I	or director Block 11 if



FLORIDA DEPARTMENT OF STATE Ken Detzner

Secretary of State

January 30, 2003

KIWANIS CLUB OF THE UNIVERSITY CITY, INC. 10425 SW 48 PL GAINESVILLE, FL'32608 US

Subject: KIWANIS CLUB OF THE UNIVERSITY CITY, INC.

Reference Number:

-N93000000840

Please be advised, we have received your annual report/uniform business report; however, the report has not been filed and a copy is being returned for the following correction(s):

To be accepted by our bank, a check must be completed in its entirety. Both the numeric and written amounts must be completed.

After the corrections have been made, please return the report to: Division of Corporations, P.O. Box 1500, Tallahassee, Florida 32302-1500 within 30 days from the date of this letter.

If you have additional questions or need further assistance, please call the Division of Corporations at (850) 488-9000.

/MJ ANNUAL REPORTS SECTION