2002 UNIFORM BUSINESS REPORT (UBR)

Jan 22, 2002 8:00 am Secretary of State **DOCUMENT # N9400003451** 01-22-2002 90020 021 ****61.25 THE KIWANIS HORSES FOR HANDICAPPED FOUNDATION OF PINELLAS COUNTY, INC. Principa Place of Business Mailing Address 7300 SUN IS AND DR #1803 SO-PASADENA 1 33707-6313 7300 SUN ISLAND DR #1803 SO PASADENA 23707-6313 33707-6313 3. Mailing Address 1001 Starkey Rd. 2. Principal Place of Business 1001 Starkey Rd. #73 Suite, Apt. #, etc. #73 Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Applied For City & State City & State 4. FEI Number 59-3259486 FLLargo, Not Applicable Largo, Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired П 33771 US Fee Required 33771 US 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Donald E. Harris Street Address (P.O. Box Number is Not Acceptable) *BERNSTEIN, HARVEY <u> 1001 Starkey Rd., #73</u> 7300 SUN ISLAND DR #1803 SO PASADENA FL 33707-6313 City Largo Zip Code 33771 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. 1/10/2002 (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing Make Check Payable to \$5.00 May Be FILE NOW: FEE IS \$61.25 Trust Fund Contribution. Added to Fees Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 11. 10. ☐ Change Addition ☐ Delete TITLE TITLE MAUS, ROBERT Beth Langebrake NAME NAME STREET ADDRESS STREET ADDRESS 19569 117 FT N 12908 Lois Ave. CITY-ST-ZIP CITY-ST-ZIP SEMINOLE FL 33772 Seminole, FL 33772 ☐ Addition TITLE Change ☐ Delete DABROWSKI, PETER NAME STREET ADDRESS STREET ADDRESS 117 N. BUENA VISTA CITY-ST-ZIP CITY-ST-ZIP **DUNEDIN FL 33764** Addition Change TITLE BERNSTEIN, HARVEY S Donald E. Harris NAME NAME STREET ADDRESS 1001 Starkey Rd., Largo, FL 33771 STREET ADDRESS 7300 SON ISLAND DR #1803 CITY-ST-ZIP Largo, FL CITY-ST-ZIP SO PASADENA FL 33707-6313 **√**□ Change ☐ Addition ☐ Delete TITLE S/D TITLE HARRIS, PATRICIA L NAME NAME 1001 STARKEY RD LOT 73 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP LARGO FL 33771 ▼ Addition Change Delete DIDE LOCASCIO. MARIO NAME Jackie Lyons NAME STREET ADDRESS 8696 112 ST N STREET ADDRESS 7701 Starkey Rd., #521 CITY-ST-ZIP CITY-ST-ZIP SEMINOLE FL 33772 Seminole, FL 33777 ☐ Addition Delete TITLE Change TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP

FILED

12. I hereby certify that the information supplied with this filling 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:

Patricia L. Harris, Sec. 1/10/2002