

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N96000004236

1. Entity Name

KIWANIS CLUB OF SOUTH BREVARD BEACHES, FLORIDA,

Principal Place of Business

455 GENESSEE AVENUE  
INDIALANTIC FL 32903

Mailing Address

455 GENESSEE AVENUE  
INDIALANTIC FL 32903-4111

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country

**FILED**  
**Mar 04, 2000 8:00 am**  
**Secretary of State**

03-04-2000 90034 002 \*\*\*\*61.25



DO NOT WRITE IN THIS SPACE

4. FEI Number

65-0654491

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

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

MARCOTTE, MARGARET  
455 GENESSEE AVENUE  
INDIALANTIC FL 32903

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 ☐ Delete

NAME  
D HORSLEY, DIANE BACCUS  
STREET ADDRESS  
320 SECOND AVENUE  
CITY-ST-ZIP  
INDIALANTIC FL 32903

TITLE ☐ Change ☐ Addition

TITLE ☐ Delete

NAME  
D MAXWELL, NEDRA  
STREET ADDRESS  
305 12TH TERRACE  
CITY-ST-ZIP  
INDIALANTIC FL

TITLE ☐ Change ☐ Addition

TITLE ☐ Delete

NAME  
PD MARCOTTE, MARGARET  
STREET ADDRESS  
455 GENESSEE AVENUE  
CITY-ST-ZIP  
INDIALANTIC FL 32903

TITLE ☐ Change ☐ Addition

TITLE ☐ Delete

NAME  
T JOSEPH, MARY J  
STREET ADDRESS  
1811 S. PATRICK DRIVE  
CITY-ST-ZIP  
INDIAN HARBOR BEACH FL 32937

TITLE ☐ Change ☐ Addition

TITLE ☐ Delete

NAME  
S Mary Hight  
STREET ADDRESS  
433 Nautilus Drive  
CITY-ST-ZIP  
Satellite Beach FL 32937

TITLE ☐ Change ☒ Addition

TITLE ☐ Delete

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ 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: *Mary Hight*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2-28-2000

Date

Daytime Phone #

CR2E037 (9/99)