

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
May 24, 2001 8:00 am
Secretary of State

05-24-2001 90495 033 ****61.25

DOCUMENT # N99000002687

1. Entity Name

KIWANIS OF VERO BEACH, INC.

Principal Place of Business

1701 HWY. A1A, STE. 220
 VERO BEACH FL 32963

Mailing Address

1701 HWY. A1A, STE. 220
 VERO BEACH FL 32963

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country

4. FEI Number

59-6153284

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

HATCH, IRA C
 1701 HWY. A1A, STE. 220
 VERO BEACH FL 32963

7. Name and Address of New Registered Agent

Name **TINA M. Nicholson**

Street Address (P.O. Box Number is Not Acceptable)
752 So US Hwy 1

City **VERO BEACH, FL** Zip Code **32962**

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 *Tina M. Nicholson*

Signature, typed or printed name of registered agent and title if applicable.

(NOT: Registered Agent signature required when reinstating)

DATE

5/1/01

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

TITLE	PD	<input checked="" type="checkbox"/> Delete
NAME	HATCH, IRA C	
STREET ADDRESS	1701 HWY. A1A, STE. 220	
CITY-ST-ZIP	VERO BEACH FL 32963	
TITLE	D	<input type="checkbox"/> Delete
NAME	POLICARE, MIKE	
STREET ADDRESS	1701 HWY. A1A, STE. 220	
CITY-ST-ZIP	VERO BEACH FL 32963	
TITLE	TD	<input checked="" type="checkbox"/> Delete
NAME	KMETZ, MICHAEL L	
STREET ADDRESS	1701 HWY. A1A, STE. 220	
CITY-ST-ZIP	VERO BEACH FL 32963	
TITLE	V	<input type="checkbox"/> Delete
NAME	TREMBLE, RANDY	
STREET ADDRESS	1701 HWY. A1A, STE. 220	
CITY-ST-ZIP	VERO BEACH FL 32963	
TITLE	S	<input type="checkbox"/> Delete
NAME	MANN, JOHN	
STREET ADDRESS	1701 HWY. A1A, STE. 220	
CITY-ST-ZIP	VERO BEACH FL 32963	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	PD	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Tremble, Randy	
STREET ADDRESS	752 So. US Hwy 1	
CITY-ST-ZIP	VERO BEACH, FL 32962	
TITLE	VP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Policare, Mike	
STREET ADDRESS	752 So. US Hwy 1	
CITY-ST-ZIP	VERO BEACH, FL 32962	
TITLE	D	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Caldarone, Eugene	
STREET ADDRESS	752 So. US Hwy 1	
CITY-ST-ZIP	VERO BEACH, FL 32962	
TITLE	T	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Tina Nicholson	
STREET ADDRESS	752 So. US Hwy 1	
CITY-ST-ZIP	VERO BEACH, FL 32962	
TITLE	S	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Mann, John	
STREET ADDRESS	752 So. US Hwy 1	
CITY-ST-ZIP	VERO BEACH, FL 32962	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

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 is 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: *Tina M. Nicholson* **Tina Nicholson Treasurer 5/1/01 561 564-8801**

CR2E037 (10/00)