

FILED  
Aug 13, 2001 8:00 am  
Secretary of State

07-25-2001 90012 007 \*\*\*\*61.25  
04-02-2001 90319 033 \*\*\*\*61.25

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N99000003740

1. Entity Name

KIWANIS CLUB OF DOWNTOWN DAYTONA BEACH, INC.

Principal Place of Business

140 MAIN STREET  
DAYTONA BEACH FL 32118

Mailing Address

140 MAIN STREET  
DAYTONA BEACH FL 32118

2. Principal Place of Business

220 S. Ridgewood

Suite, Apt. #, etc.

200

3. Mailing Address

220 S. Ridgewood

Suite, Apt. #, etc.

200

City & State

Daytona Beh

City & State

Daytona Beh

Zip

32114

Country

Vel

Zip

32114

Country

Vel

4. FEI Number

59-3437024

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

PALMETTO CHARTER SERVICES, INC.  
150 MAGNOLIA AVE.  
DAYTONA BEACH FL 32114

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

*Douglas Martin* Pres

7-17-01

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

(NOTE: Registered Agent signature required when registering)

Date

FILE NOW: FEE IS \$61.25

After September 12, 2001, min. will be \$236.25

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 D  
NAME GRANT, GREG  
STREET ADDRESS 571 LEeway TRAIL  
CITY-ST-ZIP ORMOND BEACH FL 32174 ☒ Delete

TITLE D  
NAME BIRTHRONG, WENDY  
STREET ADDRESS 85 FREEMONT AVE., #204  
CITY-ST-ZIP DAYTONA BEACH FL 32114 ☒ Delete

TITLE D  
NAME LAPINS, ANDREA  
STREET ADDRESS 24 TWIN RIVER DRIVE  
CITY-ST-ZIP ORMOND BEACH FL 32174 ☒ Delete

TITLE P  
NAME MARTIN, MICHELLE  
STREET ADDRESS 2947 S. ATLANTIC AVE., #901  
CITY-ST-ZIP DAYTONA BEACH SHORES FL 32118 ☐ Delete

TITLE P  
NAME FERGUSON, JOHN  
STREET ADDRESS 17 SYCAMORE CIR.  
CITY-ST-ZIP ORMOND BEACH FL 32174 ☒ Delete

TITLE V  
NAME MARTIN, DOUG  
STREET ADDRESS 2947 S. ATLANTIC AVE., #901  
CITY-ST-ZIP DAYTONA BEACH SHORES FL 32118 ☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE T  
NAME John Myers  
STREET ADDRESS 63 N. St Andrews  
CITY-ST-ZIP Ormond Beh FL 32174 ☐ Change ☒ Addition *Director*

TITLE VP  
NAME Terri Malia  
STREET ADDRESS 1251 Sunset Circle  
CITY-ST-ZIP Daytona Beh, FL 32117 ☐ Change ☒ Addition *Director*

TITLE D  
NAME Martin, Michelle  
STREET ADDRESS 56 N. St Andrews  
CITY-ST-ZIP Ormond Beh, FL 32174 ☒ Change ☐ Addition *Director*

TITLE P  
NAME Martin, Doug  
STREET ADDRESS 56 N. St Andrews  
CITY-ST-ZIP Ormond Beh, FL 32174 ☒ Change ☐ Addition *Director*

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:

*Douglas Martin* Pres


SIGNATURE AND TYPE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

7-17-01

386-255-1981

Attachment Doc#  N990000003740  
77411

FLORIDA DEPARTMENT OF STATE  
Katherine Harris  
Secretary of State

July 26, 2001

KIWANIS CLUB OF DOWNTOWN DAYTONA BEACH, INC.  
220 S RIDGEWOOD, #200  
DAYTONA BEACH, FL 32114

Subject: KIWANIS CLUB OF DOWNTOWN DAYTONA BEACH, INC.

Reference Number: N99000003740

Please be advised, we have received your annual report/uniform business report and your check(s) totaling \$122.50; however, the report has not been filed and a copy is being returned for the following correction(s):

Florida nonprofit corporations are required to have at least 3 directors or trustees. Please place the letter "D" or "T" beside the names and business addresses of each director or trustee.

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.

/SA  
ANNUAL REPORTS SECTION