

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 722813

FILED
Mar 05, 2004
Secretary of State

Entity Name: KIWANIS CLUB OF PLANTATION FLORIDA FOUNDATION, INC.

Current Principal Place of Business:

6221 BANYAN TERR
PLANTATION, FL 33317 US

New Principal Place of Business:

Current Mailing Address:

6221 BANYAN TERR
PLANTATION, FL 33317 US

New Mailing Address:

FEI Number: 23-7160768 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

MCGONICLE, JAMES T
6221 BANYAN TR
FORT LAUDERDALE, FL 33317 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

_____ Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: BUSCH, ALLEN
Address: 304 NW 97 AVE.
City-St-Zip: PLANTATION, FL 33324

Title: DV () Delete
Name: HAWKINS, TIMOTHY
Address: 6800 PLANTATION RD
City-St-Zip: PLANTATION, FL 33317

Title: TD () Delete
Name: MCGONIGLE, JAMES T
Address: 6221 BANYAN TERR
City-St-Zip: PLANTATION, FL 33317 US

Title: DV () Delete
Name: QUITTNER, MARVIN
Address: 1351 SW 69 AVE
City-St-Zip: PLANTATION, FL 33317

Title: SD () Delete
Name: RODWIN, DONALD
Address: 9701 SEA TURTLE DR
City-St-Zip: PLANTATION, FL 33317

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: MORRIS, RONALD
Address: 4700 SW 110TH AVE
City-St-Zip: FT LAUDERDALE, FL 33328

Title: DV (X) Change () Addition
Name: STONER, GENE
Address: 4361 COUNTRY CLUB CIRCLE
City-St-Zip: PLANTATION, FL 33317

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JAMES T MCGONIGLE

TRES

03/05/2004

Electronic Signature of Signing Officer or Director

_____ Date