

2-6-10 2-16-16
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Feb 06 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
 Secretary of State
 DIVISION OF CORPORATIONS

DOCUMENT # **733997** (1)
 1. Corporation Name
KIWANIS CLUB OF PERRINE CUTLER RIDGE, INC.



Principal Place of Business Mailing Address

% YERBY BARKER, SECRETARY
 10585 SW 109 COURT #202
 MIAMI FL 33176

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 10585 SW 109 COURT #202
 MIAMI FL 33176

3. Date Incorporated or Qualified
10/06/1975

4. FEI Number
59-6155095

Applied For
 Not Applicable

2. Principal Place of Business 2a. Mailing Address

21 Suite, Apt. #, etc. 26 Suite, Apt. #, etc.

22 City & State 27 City & State

23 Zip 24 Country 25 29 Zip 30 Country

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

6. Election Campaign Financing Trust Fund Contribution **\$5.00 May Be Added to Fees**

7. Is this nonprofit corporation a homeowners association?
 Yes No

8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No

9. Name and Address of Current Registered Agent

LUCAS, GEORGE M.
5600 SW 135 AVENUE #212
MIAMI FL 33183

10. Name and Address of New Registered Agent

81 Name **LUCAS, GEORGE M.**

82 Street Address (P.O. Box Number is Not Acceptable)
13020 S.W. 82 TER

83

84 City **MIAMI** FL 85 Zip Code **33183**

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE *George M Lucas* DATE **1.7.98**

Signature, typed or printed name of registered agent and date if applicable. (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	SD BARKER, YERBY	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	10585 SW 109 COURT #202	1.2 NAME	
STREET ADDRESS	MIAMI FL 33176	1.3 STREET ADDRESS	
CITY-ST-ZIP		1.4 CITY-ST-ZIP	
TITLE	VD DOUCETTE, LEE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	7420 S.W. 117TH STREET	2.2 NAME	
STREET ADDRESS	MIAMI FL 33156	2.3 STREET ADDRESS	
CITY-ST-ZIP		2.4 CITY-ST-ZIP	
TITLE	VD SMITH, RONALD A.	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	16981 SW 277 STREET	3.2 NAME	
STREET ADDRESS	HOMESTEAD FL 33031	3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE	PD LUCAS, GEORGE M.	4.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	5600 S.W. 135TH AVENUE #212	4.2 NAME	
STREET ADDRESS	MIAMI FL 33183	4.3 STREET ADDRESS	PD HATEM, VIQ TOR 9060 SW 140 ST MIAMI FL 33176
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE	TD GRIBBON, PATRICK	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	7700 NORTH KENDALL DR., #505	5.2 NAME	
STREET ADDRESS	MIAMI FL 33156	5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *Patrick Gribbon* **REQUIRED** DATE: **1/14/98** DAYTIME PHONE: **305-279-6623**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E037 (10/97)