

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

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FILED
Mar 17, 2011
Secretary of State

Entity Name: ABERNATHY PORT CHARLOTTE KIWANIS FOUNDATION, INC.

Current Principal Place of Business:

3440 CONWAY BLVD .
SUITE 1A
PORT CHARLOTTE, FL 33952

New Principal Place of Business:

Current Mailing Address:

3440 CONWAY BLVD.
SUITE 1A
PORT CHARLOTTE, FL 33952

New Mailing Address:

FEI Number: 20-3272490

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LEVIN, ALLEN J
3440 CONWAY BLVD .
SUITE 1A
PORT CHARLOTTE, FL 33952 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: T
Name: HURLEY, LAWRENCE
Address: 1412 WALBERG ST
City-St-Zip: NORTH PORT, FL 34288

Title: TP
Name: LEVIN, ALLEN J
Address: 1238 VERMEER DRIVE
City-St-Zip: NOKOMIS, FL 34275

Title: TS
Name: AZAR-LEVIN, GABRIELLE
Address: 1238 VERMEER DRIVE
City-St-Zip: NOKOMIS, FL 34275

Title: T
Name: JOHNSON, LEROY
Address: 2465 ELKCAM BLVD
City-St-Zip: PORT CHARLOTTE, FL 33952

Title: T
Name: VACCA, SUSAN
Address: 3417-C TAMiami TRAIL
City-St-Zip: PORT CHARLOTTE, FL 33952

Title: TT
Name: GERACE, CATHERINE
Address: 700 JARVIS STREET
City-St-Zip: PORT CHARLOTTE, FL 33980

I hereby 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 all other like empowered.

SIGNATURE: ALLEN J. LEVIN

PRES

03/17/2011

Electronic Signature of Signing Officer or Director

Date