

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000008486

FILED
Mar 21, 2010
Secretary of State

Entity Name: KIWANIS CLUB OF NORTH PORT EARLY BIRDS, INC.

Current Principal Place of Business:

12691 S TAMIAMI TRAIL
NORTH PORT, FL 34287 US

New Principal Place of Business:

12691 S. TAMIAMI TRAIL
NORTH PORT, FL 34287 US

Current Mailing Address:

P. O. BOX 7185
NORTH PORT, FL 34287 US

New Mailing Address:

FEI Number: 20-3346407 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

MILLER, DESIREE
2605 ENSENADA LANE
NORTH PORT, FL 34286 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: P
Name: RICHARD, CUCCHI
Address: 12691 S TAMIAMI TRAIL
City-St-Zip: NORTH PORT, FL 34287 US

Title: D
Name: TOM, JONES
Address: 3552 TROPICARE BLVD
City-St-Zip: NORTH PORT, FL 34286 US

Title: S
Name: BERRY, SHERRY
Address: 7141 BECKWITH AVE
City-St-Zip: NORTH PORT, FL 34291 US

Title: T
Name: MILLER, DESIREE
Address: 2605 ENSENADA LANE
City-St-Zip: NORTH PORT, FL 34286 US

Title: P
Name: ALLEN-EMRICH, ELAINE
Address: 8408 LABOCA AVENUE
City-St-Zip: NORTH PORT, FL 34287 US

Title: D
Name: DOLORES, BRECKENRIDGE
Address: 1061 CHESHIRE ST
City-St-Zip: PORT CHARLOTTE, FL 33953 US

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: DOLORES BRECKENRIDGE

D

03/21/2010

Electronic Signature of Signing Officer or Director

_____ Date