2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N0000001779

City-St-Zip:

HALLANDALE BEACH, FL 33009

Entity Name: KIWANIS CLUB OF HALLANDALE BEACH INC

FILED Jan 16, 2008 Secretary of State

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Current P	rincipal Place	of Business:	New Principal Place of Business:			
1025 EAS	OSEPH A. AM FHALLANDAL ALE, FL 33009	E BEACH BLVD				
Current Mailing Address:			New Mailing Address:			
1025 EAS	OSEPH A. AM Γ HALLANDAL ALE, FL 33009	E BEACH BLVD				
FEI Number: 65-0559138 FEI Number Applied For ()			FEI Number Not Applicable () Certificate of Status Desired ()			
Name and	Address of C	urrent Registered Agent:	Name and	Address of N	lew Registered Agent:	
610 SOUT	S, STEPHEN H PARK ROAI DOD, FL 3302	D #1-27				
	named entity s e of Florida.	submits this statement for the p	ourpose of changing i	ts registered o	ffice or registered agent, or bo	
SIGNATUR	RE:					
Electronic Signature of Registered Ag			ent	nt Date		
OFFICERS	S AND DIREC	TORS:	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS			
Title: Name: Address: City-St-Zip:	P () WRIGHT, REBI 2851 183RD S' AVENTURA, FL	Г	Title: Name: Address: City-St-Zip:	()) Change ()Addition	
Title: Name: Address: City-St-Zip:	CUMMINGS, S	RK ROAD #1-27	Title: Name: Address: City-St-Zip:	KESSEL, JOSE 418 SUNSET D		
Title: Name: Address: City-St-Zip:	KING, EARL 3331 NW 71ST	Delete ST REEK, FL 33073	Title: Name: Address: City-St-Zip:	CUMMINGS, S	RK ROAD #1-27	
Title: Name: Address: City-St-Zip:	AMUNATEGUÌ,	Delete JOSEPH II DR. NDALE BEACH BLVD. FL 33009	Title: Name: Address: City-St-Zip:	CARRILLO, JO 410 SE 3RD ST		
Title: Name: Address:	VP (X KESSEL, JOE 418 SUNSET D	Delete	Title: Name: Address:) Change ()Addition	

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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.

City-St-Zip:

SIGNATURE: STEPHEN P. CUMMINGS SEC 01/16/2008