2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 701861

Entity Name: KIWANIS CLUB OF BISCAYNE BAY, INC.

Current Principal Place of Business:

535 BIRD ROAD CORAL GABLES, FL 33146

Current Mailing Address:

535 BIRD ROAD CORAL GABLES, FL 33146 US

FEI Number: 59-0709941

Name and Address of Current Registered Agent:

ROSINEK, JEFFREY 535 BIRD ROAD CORAL GABLES, FL 33146 US FILED Feb 11, 2015 Secretary of State CC3255324087

Date

Certificate of Status Desired: No

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

Officer/Director Detail :

Title	D	Title	S
Name	ALVAREZ, MAYALY	Name	CHIBNIK, SEAN
Address	13617 SW 118 PATH	Address	690 SW 1 COURT
City-State-Zip:	MIAMI FL 33186	City-State-Zip:	1204 MIAMI FL 33130
Title	Т	Title	D
Name	SILVERMAN, SAUL H	Name	- AABA, AARON
Address	8430 S.W. 170TH TERR.	Address	1575 NW 14 STREET
City-State-Zip:	MIAMI FL 33157	City-State-Zip:	MIAMI FL 33125
Title	Р	Title	D
Name	PATON, SEAN	Name	ARNOLD, ROBERT
Address	2320 MARINA BAY DR F	Address	335 S BISCAYNE BLVD APT 305
City-State-Zip:	FT LAUDERDALE FL 33312	City-State-Zip:	MIAMI FL 33131
Title	PRESIDENT ELECT	Title	VP
Name	GAVIRIA, CARLOS	Name	RUNYON, DAVID
Address	1101 BRICKELL AVE 16 FL NORTH TOWER	Address	11098 BISCAYNE BLVD 203
City-State-Zip:	MIAMI FL 33131	City-State-Zip:	MIAMI FL 33161

Continues on page 2

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: SAUL H SILVERMAN

TREASURER

02/11/2015

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title	VP	Title	DIRECTOR
Name	CARTENUTO, ALBERT III	Name	BURGOA, SILVIA
Address	1255 MARSEILLE DRIVE 121	Address	2501 BRICKELL AVENUE 1203
City-State-Zip:	MIAMI BEACH FL 33141-2829	City-State-Zip:	MIAMI FL 33129
Title	DIRECTOR	Title	DIRECTOR
Name	FUENTES, CARLOS	Name	MATUSOW, LEWIS
Address	1 NE 2 AVENUE 200	Address City-State-Zip:	13002 SW 112 PLACE MIAMI FL 33176
City-State-Zip:	MIAMI FL 33132	ony-onate-zip.	
Title	DIRECTOR		
Name	REICH, OREN		
Address	5262 LA GORCE		
City-State-Zip:	MIAMI BEACH FL 33140		