2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 701861

Entity Name: KIWANIS CLUB OF BISCAYNE BAY, INC.

Current Principal Place of Business:

8430 SW 170 TERRACE PALMETTO BAY, FL 33157

Current Mailing Address:

8430 SW 170 TERRACE

PALMETTO BAY, FL 33157 US

FEI Number: 59-0709941 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SILVERMAN, SAUL 8430 SW 170 TERRACE PALMETTO BAY, FL 33157 US

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: SAUL SILVERMAN 04/09/2021

Electronic Signature of Registered Agent

Date

FILED Apr 09, 2021

Secretary of State

0915006588CC

Officer/Director Detail:

Title SECRETARY Title TREASURER

NamePHELAN, MICHAELNameSILVERMAN, SAUL HAddress4448 NAUTILUS DRIVEAddress8430 S.W. 170TH TERR.

City-State-Zip: MIAMI BEACH FL 33140 City-State-Zip: MIAMI FL 33157

PAST PRESIDENT Title Title **PRESIDENT** Name CALZON, CARMEN GAYOSO, KELLIE Name Address 2123 SW 59 AVENUE Address 2123 SW 59 AVENUE City-State-Zip: MIAMI FL 33155 City-State-Zip: MIAMI FL 33155

Title DIRECTOR Title PRESIDENT ELECT

Name ARNOLD, ROBERT Name HERNANDEZ, NELLIE

Address 80 SW 8 STREET Address 2030 S DOUGLAS ROAD UNIT 405

TE 2000

City-State-Zip: MIAMI FL 33130 City-State-Zip: CORAL GABLES FL 33134

Title DIRECTOR Title DIRECTOR

Name FUENTES, CARLOS Name MOSS, VYONDA

Address 1 NE 2 AVENUE Address 1184 NW 47 TERRACE

SUITE 200 City-State-Zip: MIAMI FL 33127

City-State-Zip: MIAMI FL 33132

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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 04/09/2021

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued:

Title ASST SECRETARY
Name ROSINEK, JEFFREY
Address 13209 DUBUQUE ROAD
City-State-Zip: SHOHOMISH WA 98290