

**2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 709246

**Entity Name:** KIWANIS CLUB OF ROCKLEDGE-VIERA INC.

**Current Principal Place of Business:**

881 PINE BAUGH ST  
ROCKLEDGE, FL 32955

**Current Mailing Address:**

PO BOX 560427  
ROCKLEDGE, FL 32956-0427 US

**FEI Number:** 59-6168944

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

CROCKETT, SHARON  
SHARON CROCKETT  
881 PINE BAUGH ST  
ROCKLEDGE, FL 32955 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:** SHARON CROCKETT

02/03/2024

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title            PRESIDENT  
Name            INCORVIA, JEFF  
Address        2840 TREASURE CAY LANE  
City-State-Zip: MELBOURNE FL 32940

Title            TREASURER  
Name            HARDY, BARBARA  
Address        1048 JACARANDA CIRCLE  
City-State-Zip: ROCKLEDGE FL 32955

Title            S  
Name            CROCKETT, SHARON  
Address        881 PINE BAUGH STREET  
City-State-Zip: ROCKLEDGE FL 32955

Title            DIRECTOR  
Name            BASHER, JOHNNY  
Address        2285 MURRELL ROAD APT A322  
City-State-Zip: ROCKLEDGE FL 32955

Title            VP  
Name            HARTSELLE, MONA  
Address        4241 BRANTLEY CIRCLE  
City-State-Zip: ROCKLEDGE FL 32955

Title            DIRECTOR  
Name            HARTSELLE, TED  
Address        4241 BRANTLEY CIRCLE  
City-State-Zip: ROCKLEDGE FL 32955

Title            DIRECTOR  
Name            HARDY, ANDREW  
Address        1048 JACARANDA CIRCLE  
City-State-Zip: ROCKLEDGE FL 32955

*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:** BARBARA HARDY

TREASURER

02/03/2024

Electronic Signature of Signing Officer/Director Detail

Date