

**2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N05000008486

**Entity Name:** KIWANIS CLUB OF NORTH PORT EARLY BIRDS, INC.**Current Principal Place of Business:**12691 S. TAMIAMI TRAIL  
NORTH PORT, FL 34287**Current Mailing Address:**P. O. BOX 7185  
NORTH PORT, FL 34287 US**FEI Number: 20-3346407****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**BERRY, SHERRY  
7141 BECKWITH AVE.  
NORTH PORT, FL 34291 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:**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title D, DIRECTOR  
Name JONES, THOMAS  
Address 3552 TROPICARE BLVD.  
City-State-Zip: NORTH PORT FL 34286

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

Title D  
Name JONES, DAWN  
Address 3552 TROPIAIRE BLVD.  
City-State-Zip: NORTH PORT FL 34287

Title P, PRESIDENT  
Name RICHARD, CUCCHI  
Address 1291 S.TAMIAMI TRAIL  
City-State-Zip: NORTH PORT FL 34287

Title T  
Name LORD, SUSAN  
Address 1368 SARGENT ST.  
City-State-Zip: NORTH PORT FL 34286

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

*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****DIRECTOR****02/20/2013**

Electronic Signature of Signing Officer/Director Detail

Date