

**2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N97000006303

**FILED**  
**Apr 18, 2016**  
**Secretary of State**  
**CC0910638901**

**Entity Name:** KIWANIS YOUTH FOUNDATION OF MONTICELLO, FLORIDA, INC.

**Current Principal Place of Business:**

264 N CHERRY ST  
MONTICELLO, FL 32344

**Current Mailing Address:**

P.O. BOX 357  
MONTICELLO, FL 32345

**FEI Number: 59-3477486**

**Certificate of Status Desired: No**

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

SORENSEN, BRENDA  
264 N CHERRY ST  
MONTICELLO, FL 32344 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  
Name WALTON, KATRINA  
Address 450 CARNEY ROAD  
City-State-Zip: MONTICELLO FL 32344

Title D  
Name SORENSEN, BRENDA  
Address 264 N CHERRY ST  
City-State-Zip: MONTICELLO FL 32344

Title D  
Name BLOW, FRANK  
Address 1685 BOSTON HIGHWAY  
City-State-Zip: MONTICELLO FL 32344

*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: BRENDA SORENSEN

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04/18/2016

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date