

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 704946

FILED
Apr 11, 2011
Secretary of State

Entity Name: DELRAY BEACH KIWANIS CHARITIES INC

Current Principal Place of Business:

KIWANIS CLUB OF DELRAY
301 W. ATLANTIC AVENUE O-3
DELRAY BEACH, FL 33444

New Principal Place of Business:

Current Mailing Address:

KIWANIS CLUB OF DELRAY
255 2ND AVENUE, #208
DELRAY BEACH, FL 33444

New Mailing Address:

FEI Number: 59-6137985 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

SALOMON, SHIRLEY
2029 HARWOOD D
DEERFIELD BEACH, FL 33442 US

Name and Address of New Registered Agent:

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

OFFICERS AND DIRECTORS:

Title: SD
Name: SALOMON, SHIRLEY
Address: 2029 HARDWOOD D
City-St-Zip: DEERFIELD BEACH, FL 33442

Title: T
Name: LUNSFORD, JAMES D
Address: 2807 SW 5TH STREET
City-St-Zip: BOYNTON BEACH, FL 33435

Title: PD
Name: DAVID, RICK
Address: 2200 S. OCEAN BLVD. #107
City-St-Zip: DELRAY BEACH, FL 33483

Title: PED
Name: SHEEHAN, MATT
Address: 2755 W ATLANTIC AVE #101
City-St-Zip: DELRAY BEACH, FL 33445

Title: D
Name: CANNING, VINCE
Address: 1019 NASSAU ST
City-St-Zip: DELRAY BEACH, FL 33483

Title: D
Name: PERLMAN, ALVIN
Address: 1717 HOMEWOOD BLVD., #145
City-St-Zip: DELRAY BEACH, FL 33445

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: ALVIN PERLMAN

D

04/11/2011

Electronic Signature of Signing Officer or Director

_____ Date