

**2007 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jan 18, 2007 8:00 am
Secretary of State

01-18-2007 90107 009 ****61.25

DOCUMENT # 710321

1. Entity Name

KIWANIS CLUB OF MIDTOWN, ST. PETERSBURG,
FLORIDA, INC.



Principal Place of Business

C/O HARVEY BERNSTEIN
12000 DOLPHIN BLVD S.
SAINT PETERSBURG, FL 33703-3812

Mailing Address

C/O HARVEY BERNSTEIN
12000 DOLPHIN BLVD S.
SAINT PETERSBURG, FL 33703-3812

60002664



01042007 No Chg-NP

CR2E037 (4/06)

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4. FEI Number

59-0690574

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

MIDTOWN KIWANIS CLUB
C/O HARVEY BERNSTEIN
2000 DOLPHIN BLVD S.
SAINT PETERSBURG, FL 33703-3812

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8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$61.25
Due by May 1, 2007**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE S
NAME FRENCH, RICHARD
STREET ADDRESS 557 NORTHMOOR AVE N.
CITY-ST-ZIP SAINT PETERSBURG, FL 33702

TITLE T
NAME BERNSTEIN, HARVEY
STREET ADDRESS 2000 DOLPHIN BLVD S.
CITY-ST-ZIP SAINT PETERSBURG, FL 337033812

TITLE P
NAME KNOWLES, WILLIAMS L
STREET ADDRESS 1307-41 AVE. NE
CITY-ST-ZIP ST. PETERSBURG, FL

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

Harvey S Bernstein HARVEY S BERNSTEIN 1/15/07 727 347 9387