

FILE NOW: FILING FEE AFTER MAY 1 IS \$155.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

FILED

95 JAN 26 PM 3:35

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **711838** (3)
1. Corporation Name
KIWANIS CLUB OF FORT LAUDERDALE BEACH, FLORIDA, INC.

Principal Place of Business Mailing Address
***ROBERT F. LEWIS** ***ROBERT F. LEWIS**
P.O. BOX 11543 P.O. BOX 11543
FT. LAUDERDALE FL 33339-1543 FT. LAUDERDALE FL 33339-1543

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified **11/23/1966** 3a. Date of Last Report **03/16/1994**
4. FEI Number **23-7003659** Applied For Not Applicable
5. Certificate of Status Desired \$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status \$68.75 Supplemental Fee Not Required
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes Yes No

2. Principal Place of Business 2a. Mailing Address
21 **Best NE FL. LAUDERDALE** 28 Suite, Apt. #, etc.
22 City & State 27 City & State
23 Zip 26 Zip Country 30 Country
24 25 29

9. Name and Address of Current Registered Agent
LEWIS, ROBERT F.
3051 N.W. 48TH STREET, #207
FT. LAUDERDALE FL 33308

10. Name and Address of New Registered Agent
81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City **FL** 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE _____ (Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS	
TITLE	SD
NAME	RYAN, JOHN D.
STREET ADDRESS	4901 NW 17TH WAY
CITY-ST-ZIP	FT. LAUDERDALE FL
TITLE	TD
NAME	LEWIS, ROBERT F.
STREET ADDRESS	3051 NE 48 ST.
CITY-ST-ZIP	FT. LAUDERDALE FL
TITLE	PD
NAME	LOW, HARRY
STREET ADDRESS	2532 N.E. 22ND TERRACE
CITY-ST-ZIP	FT. LAUDERDALE FL
TITLE	P
NAME	WOODBURN, ROBERT
STREET ADDRESS	2855 E. OAKLAND PARK AVE.
CITY-ST-ZIP	FT. LAUDERDALE FL
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
1.1 TITLE	President <input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	Mr. George McDonald
1.3 STREET ADDRESS	6463 S.W. 8th Court
1.4 CITY-ST-ZIP	Nth. Lauderdale FL. 33068 <input type="checkbox"/> Change <input type="checkbox"/> Addition
2.1 TITLE	
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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, authorized in writing to report as required by Chapter 017, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Robert F. Lewis
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER

Robert F. Lewis
3051 N.W. 48th St #207
FT. LAUDERDALE, FL 33308

Date: 1/19/95 For 708 722-2466
Expiring Year: _____