

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 04, 2004 8:00 am
Secretary of State

02-04-2004 90068 013 ****61.25

DOCUMENT # 734606

1. Entity Name

KIWANIS CLUB OF MARGATE-COCONUT CREEK,
FLORIDA, INC.



Principal Place of Business

C/O CARL CUMMIS
6100 WARANNE BLVD.
MARGATE FL 33063

Mailing Address

10980 LAKEFRONT PLACE
BOCA RATON FL 33498
US

2. Principal Place of Business

8000 COUNTRY CLUB DR.

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

MARGATE, FL.

City & State

Zip

33063

Country

USA

Country

4. FEI Number

23-7447288

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required



MOORE

CR2E037 (11/03)

6. Name and Address of Current Registered Agent

CUMMIS, CARL
10980 LAKEFRONT PLACE
BOCA RATON FL 33498

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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

Carl Cummis

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25
Due By May 1, 2004

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE: T
NAME: CUMMIS, CARL
STREET ADDRESS: 10980 LAKEFRONT PLACE
CITY-ST-ZIP: BOCA RATON FL 33498 ☐ Delete

TITLE: P
NAME: MAY, SAMUEL
STREET ADDRESS: 1680 CATHEDRAL DR
CITY-ST-ZIP: MARGATE FL 33063 ☒ Delete

TITLE: S
NAME: CUMMIS, CARL
STREET ADDRESS: 15950 LAKE CIR PL
CITY-ST-ZIP: BOCA RATON FL 33498 ☒ Delete

TITLE: PRESIDENT
NAME: SEVEIOVTZ, HERMAN
STREET ADDRESS: 7797 GULF CIR D
CITY-ST-ZIP: MARGATE FL 33063 ☐ Delete

TITLE: SECRETARY
NAME: CHARLES EWAN
STREET ADDRESS: 7707 NW 20th ST
CITY-ST-ZIP: MARGATE, FL 33063 ☐ Delete

TITLE: ☐ Delete
NAME: ☐ Delete
STREET ADDRESS: ☐ Delete
CITY-ST-ZIP: ☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE: ☐ Change ☐ Addition
NAME: ☐ Change ☐ Addition
STREET ADDRESS: ☐ Change ☐ Addition
CITY-ST-ZIP: ☐ Change ☐ Addition

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STREET ADDRESS: ☐ Change ☐ Addition
CITY-ST-ZIP: ☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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: *Charles R. Ewan, Jr.* CHARLES R. EWAN, JR.

Date: 1/27/2004

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Daytime Phone #