

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 741067

FILED
Jan 18, 2007
Secretary of State

Entity Name: KIWANIS CLUB OF MIAMI BEACH, FLORIDA

Current Principal Place of Business:

3 ISLAND AVENUE
15H
MIAMI BEACH, FL 33139 US

New Principal Place of Business:

Current Mailing Address:

18245 SW 26 CT.
MIRAMAR, FL 33029 US

New Mailing Address:

3 ISLAND AVENUE
15H
MIAMI BEACH, FL 33139 US

FEI Number: 59-6143349

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KIWANIS CLUB OF MIAMI BEACH
18245 SW 26 CT.
MIRAMAR, FL 33029 US

Name and Address of New Registered Agent:

FULLER, LARRY J ESQ.
12000 BISCAYNE BLVD
609
NORTH MIAMI BEACH, FL 33181 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: LARRY FULLER

01/18/2007

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: T () Delete
Name: ROBERT, THOMAS E
Address: 18245 SW 26 COURT
City-St-Zip: MIRAMAR, FL 33029

Title: P () Delete
Name: HALL, ALLAN
Address: 3 ISLAND AVENUE, # 15H
City-St-Zip: MIAMI BEACH, FL 33139

Title: PE () Delete
Name: CRUZ, MARIA
Address: 1447 MILLER ROAD
City-St-Zip: CORAL GABLES, FL 33146

Title: S () Delete
Name: SILVERMAN, PATRICIA
Address: 5005 COLLINS AVENUE, # 1512
City-St-Zip: MIAMI BEACH, FL 33140

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P/D (X) Change () Addition
Name: HALL, ALLAN J
Address: 3 ISLAND AVENUE
City-St-Zip: MIAMI BEACH, FL 33139

Title: VP/D (X) Change () Addition
Name: CRUZ, MARIA
Address: 1447 MILLER ROAD
City-St-Zip: CORAL GABLES, FL 33146

Title: T/D (X) Change () Addition
Name: ROBERT, THOMAS
Address: 18245 S.W. 26TH COURT
City-St-Zip: MIRAMAR, FL 33029

Title: S/D (X) Change () Addition
Name: SILVERMAN, PATRICIA
Address: 5005 COLLINS AVENUE, # 1512
City-St-Zip: MIAMI BEACH, FL 33140

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: PATRICIA SILVERMAN

S/D

01/18/2007

Electronic Signature of Signing Officer or Director

Date