

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 752210

FILED
Apr 20, 2011
Secretary of State

Entity Name: KIWANIS - HORSES AND HANDICAPPED, INC.

Current Principal Place of Business:

BOX 551
DANIA, FL 33004 US

New Principal Place of Business:

5051 SW 73 AVENUE
DAVIE, FL 33316 US

Current Mailing Address:

BOX 551
DANIA, FL 33004 US

New Mailing Address:

BOX 551
DANIA BEACH, FL 33004 US

FEI Number: 59-2036147

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

KERN, RICHARD A
2832 N.E. 24TH COURT
FT. LAUDERDALE, FL 33205 US

Name and Address of New Registered Agent:

PAOLI, ALAN J ESQ
1720 HARRISON STREET SUITE 6CW
HOLLYWOOD, FL 33020 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: ALAN J PAOLI

04/20/2011

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: VPD
Name: GOESER, BRUCE
Address: 7831 MILLER ROAD # 108B
City-St-Zip: MIAMI, FL 33155

Title: SD
Name: CERRONE, DOTTIE W
Address: 15890 SW 12TH ST
City-St-Zip: PEMBROKE PINES, FL 33027

Title: PD
Name: LEONE, LUCY
Address: 1821 SW 69 AVE
City-St-Zip: PLANTATION, FL 33317

Title: TD
Name: KERN, RICHARD
Address: 2832 N. 52ND CT
City-St-Zip: FORT LAUDERDALE, FL 33305

Title: D
Name: FUCCILE, PATTI
Address: 306 SE 6TH ST
City-St-Zip: DANIA, FL 33004

Title: D
Name: EGE, JACKIE
Address: 12125 SW 101 ST
City-St-Zip: MIAMI, FL 33186

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: PATTI FUCCILE

D

04/20/2011

Electronic Signature of Signing Officer or Director

Date