

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000005521

FILED
Apr 24, 2006
Secretary of State

Entity Name: KIWANIS CLUB OF BREAKFAST CLUB OF MARTIN COUNTY, INC.

Current Principal Place of Business:

2401 S. KANNER HIGHWAY
STUART, FL 34994

New Principal Place of Business:

281 S US HIGHWAY ONE
TEQUESTA, FL 33469

Current Mailing Address:

1109 SW IMPERIAL DR
PALM CITY, FL 34990

New Mailing Address:

281 S US HIGHWAY ONE
TEQUESTA, FL 33469

FEI Number: 65-0914644

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

TAYLOR, WILLIAM F
1109 SW IMPERIAL DR
PALM CITY, FL 34990 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: TAYLOR, NICK
Address: 1109 SW IMPERIAL DR
City-St-Zip: PALM CITY, FL 34990

Title: VP (X) Delete
Name: MILLER, CINDY
Address: 657 SE CENTRAL
City-St-Zip: STUART, FL 34994

Title: VPD () Delete
Name: BRUTON, DIANA
Address: 101 SW MONTEREY RD
City-St-Zip: STUART, FL 34994

Title: T () Delete
Name: QUAGLIA, LISA
Address: 2401 S KAGNER HWY.
City-St-Zip: STUART, FL 34994

Title: S () Delete
Name: TAYLOR, JOYCE
Address: 1109 SE IMPERIAL DR
City-St-Zip: PALM CITY, FL 34990

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: MILLER, CINDY
Address: 281 S US HIGHWAY ONE
City-St-Zip: TEQUESTA, FL 33469

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: T (X) Change () Addition
Name: BAJIS, HAYLIE
Address: 2401 S KAGNER HWY.
City-St-Zip: STUART, FL 34994

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: CINDY MILLER

P

04/24/2006

Electronic Signature of Signing Officer or Director

Date