2007 NOT-FOR-PROFIT CORPORATION **ANNUAL REPORT**

DOCUMENT # N00000005755

KIWÁNIS CLUB OF MIDTOWN ST. PETERSBURG YOUTH FOUNDATION, INC.



Principal Place of Business

C/O HARVEY BERNSTEIN 2000 DOLPHIN BLVD S SAINT PETERSBURG, FL 33703-3812 Mailing Address

C/O HARVEY BERNSTEIN 2000 DOLPHIN BLVD S SAINT PETERSBURG, FL 33703-3812

FILED Jan 18, 2007 8:00 am Secretary of State

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01042007 No Chg-NP

CR2E037 (4/06)

4. FEI Number 59-3667963 Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

o. Haine and Address of Carrent Registered Agent		
WILKINSON, G. BARRY ESQ.		
696 1ST AVE N #201		
ST PETERSBURG, FL 33701		
STPETERSBURG, PL 33/01		
<u>.</u>		
;		

DO NOT WRITE

696 1ST AVE. N. #201 ST PETERSBURG, FL 33701		· –	THIS SPACE	
The above named entity submits this statement for the p the obligations of registered agent. ** ** ** ** ** ** ** ** **	ourpose of changing its registere	d office or registered agent, or b	oth, in the State of Florida. I am familiar with, and accept	
SIGNATURE Signature, typed or provided name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE				
Filing Fee is \$61.25 Due by May 1, 2007	9. Election Campaign Financ Trust Fund Contribution.	\$5.00 May Be Added to Fees		
10. OFFICERS AND DIRECT ITILE DAME STREET ADDRESS CITY-ST-ZIP SAINT PETERSBURG, FL 33702 TITLE T BERNSTEIN, HARVEY 2000 DOLPHIN BLVD S SAINT PETERSBURG, FL 337033812 TITLE DAME STREET ADDRESS CITY-ST-ZIP STEET ADDRESS CITY-ST-ZIP STREET ADDRESS CITY-ST-ZIP STREET ADDRESS CITY-ST-ZIP STREET ADDRESS CITY-ST-ZIP STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP		-	NOT WRITE THIS SPACE	
CITY-ST-ZIP 12 I haraby cartify that the information supplied with this fi	Beer deep of well for the			

nereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 ontrustee 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:

BERNSTEIM HARVEY

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