

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000007407

FILED
Apr 29, 2005
Secretary of State

Entity Name: KIWANIS CLUB OF GREATER PEMBROKE PINES, INC.

Current Principal Place of Business:

16336 N W 11TH STREET
PEMBROKE PINES, FL 33028

New Principal Place of Business:

Current Mailing Address:

16336 N W 11TH STREET
PEMBROKE PINES, FL 33028

New Mailing Address:

FEI Number: 65-1125225

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

TYNAN, KEVIN P
8142 N. UNIVERSITY DRIVE
TAMARAC, FL 33321 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: PD () Delete
Name: STEBBINS, KENNETH
Address: 3219 EVERGREEN RD
City-St-Zip: LORIDA, FL 33228

Title: VPD () Delete
Name: BLUM, JOHN
Address: 19052 NW 23 STREET
City-St-Zip: PEMBROKE PINES, FL 33029

Title: TD (X) Delete
Name: STEBBINS, KENNETH
Address: 4935 SW 90TH TERRACE
City-St-Zip: COOPER CITY, FL 33328

Title: SD () Delete
Name: BLUM, JOHN S
Address: 19052 NW 23RD STREET
City-St-Zip: PEMBROKE PINES, FL 33029

Title: TD () Delete
Name: CROSS, KEAT
Address: 660 NW 161 AVE .
City-St-Zip: PEMBROKE PINES, FL 33028

Title: SD () Delete
Name: KLEIN, SHIRLEY
Address: 16336 NW 11 STREET
City-St-Zip: PEMBROKE PINES, FL 33028

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: BLUM, JOHN
Address: 19052 NW 23 STREET
City-St-Zip: PEMBROKE PINES, FL 33029

Title: VPD (X) Change () Addition
Name: FALCON, RICHARD
Address: 16315 NW 12 STREET
City-St-Zip: PEMBROKE PINES, FL 33028

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

Title: D (X) Change () Addition
Name: TYNAN, KEVIN
Address: 16143 NW 8 DRIVE
City-St-Zip: PEMBROKE PINES, FL 33028

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

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 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 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: KEVIN TYNAN

D

04/29/2005

Electronic Signature of Signing Officer or Director

Date