2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000008048

FILED Apr 22, 2010 Secretary of State

Entity Name: THE KIWANIS CLUB OF GOLD COAST KNIGHTS, INC.

Current Principal Place of Business: New Principal Place of Business:

C/O RENEE F. RICHAR
5435 COURTNEY CIRCLE
5435 COURTNEY CIRCLE
BOYNTON BEACH, FL 33472
C/O ROBERT S RICHAR
5435 COURTNEY CIRCLE
BOYNTON BEACH, FL 33472

Current Mailing Address: New Mailing Address:

C/O RENEE F. RICHAR
5435 COURTNEY CIRCLE
5435 COURTNEY CIRCLE
BOYNTON BEACH, FL 33472

C/O ROBERT S RICHAR
5435 COURTNEY CIRCLE
BOYNTON BEACH, FL 33472

FEI Number: 91-2004337 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

RICHAR, RENEE F

5435 COURTNEY CIRCLE

BOYNTON BEACH, FL 33472 US

RICHAR, ROBERT S

5435 COURTNEY CIRCLE

BOYNTON BEACH, FL 33472 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: ROBERT S RICHAR 04/22/2010

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: PD

Name: ANDREACCHI, ANITA
Address: 7391 LONDON LANE
City-St-Zip: BOCA RATON, FL 33433

Title: SD

Name: RICHAR, RENEE F
Address: 5435 COURTNEY CIRCLE
City-St-Zip: BOYNTON BEACH, FL 33472

Title: TD

Name: RICHAR, ROBERT S
Address: 5435 COURTNEY CIRCLE
City-St-Zip: BOYNTON BEACH, FL 33472

Title:

 Name:
 EARNEST, CAROL

 Address:
 614 NW 8TH AVENUE

 City-St-Zip:
 DELRAY BEACH, FL 33444

Title:

Name: ANDREACCHI, FRANK A
Address: 7391 LONDON LANE
City-St-Zip: BOCA RATON, FL 33433

Title: [

 Name:
 EARNEST, LOYS

 Address:
 614 NW 8TH AVENUE

 City-St-Zip:
 DELRAY BEACH, FL 33444

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: ROBERT S RICHAR TD 04/22/2010