

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03777

FILED
Feb 17, 2009
Secretary of State

Entity Name: KIWANIS CLUB OF DAVIE, INC.

Current Principal Place of Business:

9470 TANGERINE PL
SUITE 403
FT. LAUDERDALE, FL 33324 US

New Principal Place of Business:

Current Mailing Address:

9470 TANGERINE PL
SUITE 403
FT. LAUDERDALE, FL 33324 US

New Mailing Address:

FEI Number: 59-6168816 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SCHNEIDER, FRANK L
9470 TANGERINE PL
SUITE 403
FT. LAUDERDALE, FL 33324 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: KOVAC, HARVEY
Address: 2700 DAVIE ROAD
City-St-Zip: DAVIE, FL 33314

Title: VD () Delete
Name: DONATI, MIKE
Address: 1930 NW TER
City-St-Zip: PEMBROKE PINES, FL 33324

Title: TD () Delete
Name: BAYONA, GISELLE
Address: 20225 NE 34 CT # 714
City-St-Zip: AVENTURA, FL 33324

Title: SD () Delete
Name: CARTER, CARRIE S
Address: 4974 SW 94 AVE
City-St-Zip: COOPER CITY, FL 33328

Title: D () Delete
Name: OLDHAM, ROBERT
Address: 3100 SW 133 TERRACE
City-St-Zip: DAVIE, FL 3333

Title: D () Delete
Name: SCHNEIDER, FRANK L
Address: 9470 TANGERINE PLACE # 403
City-St-Zip: FT. LAUDERDALE, FL 33324

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: WHARTON, ED
Address: 3582 W TREE TOPS CT
City-St-Zip: DAVIE, FL 33328

Title: VPD (X) Change () Addition
Name: DONATI, MIKE
Address: 1930 NW TER
City-St-Zip: PEMBROKE PINES, FL 33324

Title: TRD (X) Change () Addition
Name: BAYONA, GISELLE
Address: 20225 NE 34 CT # 714
City-St-Zip: AVENTURA, FL 33324

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

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 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: GISELLE BAYONA

TRD

02/17/2009

Electronic Signature of Signing Officer or Director

Date