## 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N05000008486

FILED Mar 22, 2012 Secretary of State

Entity Name: KIWANIS CLUB OF NORTH PORT EARLY BIRDS, INC.

US

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

12691 S. TAMIAMI TRAIL NORTH PORT, FL 34287

**Current Mailing Address: New Mailing Address:** 

P. O. BOX 7185

NORTH PORT, FL 34287 US

FEI Number: 20-3346407 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired (X)

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

BERRY, SHERRY 7141 BÉCKWITH AVE. NORTH PORT, FL 34291 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:

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

JONES, THOMAS Name: Address: 3552 TROPICARE BLVD. City-St-Zip: NORTH PORT, FL 34286 US

Title:

Name: RICHARD, CUCCHI Address: 1291 S.TAMIAMI TRAIL City-St-Zip: NORTH PORT, FL 34287 US

Title:

BERRY, SHERRY Name: Address: 7141 BECKWITH AVE City-St-Zip: NORTH PORT, FL 34291 US

Title:

Name: LORD, SUSAN 1368 SARGENT ST. Address: City-St-Zip: NORTH PORT, FL 34286 US

Title:

Name: JONES, DAWN 3552 TROPIAIRE BLVD. Address: NORTH PORT, FL 34287 US City-St-Zip:

Title:

DOLORES, BRECKENRIDGE Name:

Address: 1061 CHESHIRE ST

PORT CHARLOTTE, FL 33953 US City-St-Zip:

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.

**PRES** SIGNATURE: THOMAS JONES 03/22/2012