

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000000219

FILED  
May 03, 2010  
Secretary of State

**Entity Name:** KIWANIS CLUB OF GREATER SUNRISE IN BROWARD, FLORIDA, INC.

**Current Principal Place of Business:**

6299 WEST SUNRISE BLVD  
206  
SUNRISE, FL 33313

**New Principal Place of Business:**

6299 WEST SUNRISE BLVD  
SUITE 217F  
SUNRISE, FL 33313

**Current Mailing Address:**

6299 WEST SUNRISE BLVD  
206  
SUNRISE, FL 33313

**New Mailing Address:**

6299 WEST SUNRISE BLVD  
217F  
SUNRISE, FL 33313

**FEI Number:** 03-0573445      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

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

D'OYLEY, ANTHONY  
6299 WEST SUNRISE BLVD  
STE 206  
SUNRISE, FL 33313 US

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

D'OYLEY, ANTHONY  
6299 WEST SUNRISE BLVD  
STE 217F  
SUNRISE, FL 33313 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

05/03/2010

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: P  
Name: MCMAHON, PAULETTE  
Address: 9150 NW 38TH DR. #207  
City-St-Zip: CORAL SPRINGS, FL 33065

Title: S  
Name: WILLIAMS, DAPHNE  
Address: 6299 W. SUNRISE BLVD #206  
City-St-Zip: SUNRISE, FL 33313

Title: T  
Name: BARRANT, JOHN  
Address: 4008 DEL RIO WAY  
City-St-Zip: SUNRISE, FL 33351

Title: D  
Name: YOUNG, CLAYTON  
Address: 8431 NW 45 STREET  
City-St-Zip: LAUDERHILL, FL 33351

Title: D  
Name: HODGSON, DIANE  
Address: 8600 NW 52 COURT  
City-St-Zip: LAUDERHILL, FL 33351

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: JOHN BARRANT

T

05/03/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date