

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000004755

FILED  
Mar 24, 2009  
Secretary of State

**Entity Name:** KIWANIS CLUB OF LAKE PARK FOUNDATION, INC.

**Current Principal Place of Business:**

931 VILLAGE BOULEVARD  
905-413  
WEST PALM BEACH, FL 33409

**New Principal Place of Business:**

**Current Mailing Address:**

931 VILLAGE BOULEVARD  
905-413  
WEST PALM BEACH, FL 33409

**New Mailing Address:**

**FEI Number:** 26-0162372

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

HAUSMAN, LORI W  
931 VILLAGE BLVD #905-413  
WEST PALM BEACH, FL 33419 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: GARRETTSON, PAUL  
Address: 745 ILEX CT  
City-St-Zip: LAKE PARK, FL 33403

Title: VP (X) Delete  
Name: JACOBSON, ELIZABETH  
Address: 1169 AVIARY RD  
City-St-Zip: WELLINGTON, FL 33414

Title: T ( ) Delete  
Name: HAUSMAN, LORI  
Address: 931 VILLAGE BLVD #905-413  
City-St-Zip: WEST PALM BEACH, FL 33409

Title: S ( ) Delete  
Name: MCCONVILLE, EDIE  
Address: 638 W. KALMIA DR  
City-St-Zip: LAKE PARK, FL 33403

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: PD (X) Change ( ) Addition  
Name: JACOBSON, ELIZABETH  
Address: 1169 AVIARY ROAD  
City-St-Zip: WELLINGTON, FL 33414

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: LORI HAUSMAN

T

03/24/2009

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

\_\_\_\_\_  
Date