

# **2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N07000008168

**FILED**  
**Apr 16, 2010**  
**Secretary of State**

**Entity Name:** KIAWAH COMMUNITY SERVICES INC

**Current Principal Place of Business:**

220 5TH AVENUE NORTH  
ST PETERSBURG, FL 33701

**New Principal Place of Business:**

**Current Mailing Address:**

220 5TH AVENUE NORTH  
ST PETERSBURG, FL 33701

**New Mailing Address:**

**FEI Number:** 26-0663651

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

CHARLEMAGNE, ILFRENISE  
17521 SW 73RD COURT  
MIAMI, FL 33157 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:** P  
**Name:** CHARLEMAGNE, ILFRENISE  
**Address:** 17521 SW 73RD COURT  
**City-St-Zip:** MIAMI, FL 33157

**Title:** V  
**Name:** CINE, SOLEDAD  
**Address:** 18496 S. DIXIE HWY  
**City-St-Zip:** MIAMI, FL 33157

**Title:** S  
**Name:** NELSON, JOHN A  
**Address:** 55 SE 6TH STREET  
**City-St-Zip:** MIAMI, FL 33131

**Title:** T  
**Name:** VOLCY, GEORGE  
**Address:** 102 SUNSET DR  
**City-St-Zip:** ISLAMORADA, FL 33036

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:** ILFRENISE CHARLEMAGNE

P

04/16/2010

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

\_\_\_\_\_  
Date