

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07251

FILED
Apr 29, 2009
Secretary of State

Entity Name: KIWANIS CLUB OF FLAMINGO-HIALEAH, INC.

Current Principal Place of Business:

4160 W 16 AVENUE
SUITE 401
HIALEAH, FL 33012 US

New Principal Place of Business:

Current Mailing Address:

4160 W 16 AVENUE
SUITE 401
HIALEAH, FL 33012 US

New Mailing Address:

FEI Number: 59-2588917

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SANCHEZ, FELIX
4160 W 16 AVENUE
SUITE 401
HIALEAH, FL 33012 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: DS () Delete
Name: SANCHEZ, JIMMY I
Address: 584 WEST 45 PLACENUE
City-St-Zip: HIALEAH, FL 33012

Title: DP () Delete
Name: SANCHEZ, FELIX
Address: 1480 WEST 5TH COURT
City-St-Zip: HIALEAH, FL 33010

Title: DT () Delete
Name: GONZALEZ, EDDY
Address: 7625 WEST 14 COURT
City-St-Zip: HIALEAH, FL 33012

Title: DVP () Delete
Name: GONZALEZ, WILFREDO
Address: 545 WEST 63 ST
City-St-Zip: HIALEAH, FL 33012

Title: D () Delete
Name: GARCIA, RENE
Address: 217 EAST 63RD STREET
City-St-Zip: HIALEAH, FL 33013

Title: D () Delete
Name: ROBAINA, JULIO
Address: 6140 WEST 10 AVE
City-St-Zip: HIALEAH, FL 33012

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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: FELIX SANCHEZ

PD

04/29/2009

Electronic Signature of Signing Officer or Director

Date