

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N23325 (6)

1. Corporation Name

KIWANIS CLUB OF FORT LAUDERDALE-CORAL RIDGE, INC



Principal Place of Business

Mailing Address

C/O RICHARD D. HELLER
110 S.E. 6TH STREET 28TH FLOOR
FORT LAUDERDALE FL 33301

C/O RICHARD D. HELLER
110 S.E. 6TH STREET 28TH FLOOR
FORT LAUDERDALE FL 33301

3. Date Incorporated or Qualified

11/04/1987

3a. Date of Last Report

02/15/1995

4. FEI Number

59-6168908

Applied For

☐ Not Applicable

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

HELLER, RICHARD D.
110 S.E. 6 STREETRK BLVD.
28TH FLOOR
FT LAUDERDALE FL 33301-2000

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

110 S. E. 6 Street

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

Signature typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

NAME **P MURRAY, JAMES P**
STREET ADDRESS **2728 NE 32ND ST**
CITY-ST-ZIP **LIGHTHOUSE POINT FL**

TITLE ☐ DELETE

NAME **ST HARRIS, HUGH L.**
STREET ADDRESS **5800 NE 21 TERRACE**
CITY-ST-ZIP **FT. LAUDERDALE FL**

TITLE ☐ DELETE

NAME **D ANSON, LARRY**
STREET ADDRESS **265 S.W. 87TH TERRACE**
CITY-ST-ZIP **PLANTATION FL**

TITLE ☐ DELETE

NAME **D PARLOW, ERIC**
STREET ADDRESS **1750 NE 38TH ST**
CITY-ST-ZIP **OAKLAND PARK FL**

TITLE ☐ DELETE

NAME **P BOWDREN, BILL**
STREET ADDRESS **901 N. RIVERSIDE DR., #4-A**
CITY-ST-ZIP **POMPAHO BEACH FL**

TITLE ☐ DELETE

NAME **D BRONCHICK, KEN**
STREET ADDRESS **5325 GATE LAKE RD**
CITY-ST-ZIP **TAMARAC FL**

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☒ Change ☐ Addition

1.2 NAME **P CARYL STEVENS**
1.3 STREET ADDRESS **1311 N. E. 42 Street**
1.4 CITY-ST-ZIP **Oakland Park, FL 33334**

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE ☒ Change ☐ Addition

6.2 NAME **D EUGENE ANDRESEN**
6.3 STREET ADDRESS **3400 N. W. 5 Terrace, Apt 116**
6.4 CITY-ST-ZIP **Pompano Beach, FL 33064**

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: **HUGH L. HARRIS**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Jan 24, 1996

Date

(954) 491
2586

Daytime Phone #

CR2E037 (12/95)