

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 15, 1999.
AMOUNT DUE ON OR BEFORE 09/15/99: \$61.25 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$236.25).

NONPROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katharine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED

99 SEP -1 AM 8:35

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # N23325

1. Corporation Name

KIWANIS CLUB OF FORT LAUDERDALE-CORAL RIDGE, INC

Principal Place of Business

C/O RICHARD D. HELLER 15TH
110 S.E. 6TH STREET 28TH FLOOR
FORT LAUDERDALE FL 33301

Mailing Address

C/O RICHARD D. HELLER 15TH
110 S.E. 6TH STREET 28TH FLOOR
FORT LAUDERDALE FL 33301



2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified	
21 Suite, Apt. #, etc.		26 Suite, Apt. #, etc.		11/04/1987	
22 City & State		27 City & State		4. FEI Number	
23 Zip		28 Zip		59-6168908	
24 Country		29 Country		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
25		30		6. Election Campaign Financing <input type="checkbox"/> \$5.00 May Be Added to Fees	
9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent	
HELLER, RICHARD D. 110 S.E. 6TH ST. 28TH FLOOR FT LAUDERDALE FL 33301-2000				81 Name	
				82 Street Address (P.O. Box Number is Not Acceptable)	
				83	
				84 City	
				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		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	P STEVENS, CARYL <input checked="" type="checkbox"/> DELETE	1.1 TITLE	P EUGENE ANDRESEN <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	STEVENS, CARYL	1.2 NAME	1001 N. E. 34 Court
STREET ADDRESS	1311 N.W. 42ND ST.	1.3 STREET ADDRESS	Oakland Park, FL 33334
CITY-ST-ZIP	OAKLAND PARK FL	1.4 CITY-ST-ZIP	
TITLE	ST HARRIS, HUGH L. <input type="checkbox"/> DELETE	2.1 TITLE	
NAME	HARRIS, HUGH L.	2.2 NAME	500002978905--9
STREET ADDRESS	5800 NE 21 TERRACE	2.3 STREET ADDRESS	-09/03/99--01085--010
CITY-ST-ZIP	FT. LAUDERDALE FL	2.4 CITY-ST-ZIP	*****61.25 *****61.25
TITLE	D JONES, CARL R <input checked="" type="checkbox"/> DELETE	3.1 TITLE	Pres-Elect
NAME	JONES, CARL R	3.2 NAME	ERIC PARLOW
STREET ADDRESS	349 S W 14 COURT	3.3 STREET ADDRESS	1750 N. E. 38 Street
CITY-ST-ZIP	POMPANO BEACH FL 33050-8617	3.4 CITY-ST-ZIP	Oakland Park, FL 33334-5446
TITLE	D PARLOW, ERIC <input checked="" type="checkbox"/> DELETE	4.1 TITLE	Vice-Pres
NAME	PARLOW, ERIC	4.2 NAME	Louis Murray
STREET ADDRESS	1750 NE 38TH ST	4.3 STREET ADDRESS	2940 N. W. 6 Terrace
CITY-ST-ZIP	OAKLAND PARK FL	4.4 CITY-ST-ZIP	Wilton Manors, FL 33311-2425
TITLE	D BOWDREN, BILL <input type="checkbox"/> DELETE	5.1 TITLE	Director
NAME	BOWDREN, BILL	5.2 NAME	MICHAEL GOLDSTEIN
STREET ADDRESS	901 N. RIVERSIDE DR., #4-A	5.3 STREET ADDRESS	1975 E. Sunrise Blvd.
CITY-ST-ZIP	POMPANO BEACH FL	5.4 CITY-ST-ZIP	Fort Lauderdale, FL 33304-1453
TITLE	P ANDERSEN, EUGENE <input checked="" type="checkbox"/> DELETE	6.1 TITLE	Director
NAME	ANDERSEN, EUGENE	6.2 NAME	MICHAEL DALLETT
STREET ADDRESS	3400 N W 5 TERRACE	6.3 STREET ADDRESS	1401 N. W. 45 Street
CITY-ST-ZIP	POMPANO BEACH FL 33064-3050	6.4 CITY-ST-ZIP	Oakland Park, FL 33309-3733

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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, with all other like empowered.

SIGNATURE:

Hugh L. Harris
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

HUGH L. HARRIS. July 6, 1999 954 491 2586

Date

Daytime Phone #

CR2E037 (5/99)