NONPROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # N29530

Corporation Name

KIWANIS CLUB OF FORT LAUDERDALE SOUTHSIDE FOUNDA TION, INC.

Principal Place of Business	
C/O AS MEILAN 1100 SO FEDERAL HWY	
FT LAUDERDALE FL 33316	

Mailing Address C/O AL MEILAN 1100 SO FEDERAL HWY May 10, 1999 8:00 am secretary of State

05-10-1999 90299 020 ****61.25

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US			US	US								
2. 21	ı '	ace of Business	2a. Mailing Address				3. Date Incorporat 12/02/1988	ed or Qualifed				
	Suite, Apt. a	#, etc.	Suite, Apt. #, etc.				4. FEI Number 65-0191239			ied For Applicable		
22	0' 0 0'-1		City & State				03 0 13 1200		\$8.75 Ad			
City & State			28	⊢ ′			5. Certificate of Status Desired Fee Rec					
23	Zip				ntry	•	6. Election Campaign Financing \$5.00 May Be					
24		25	29	30			Trust Fund Con	Added to	Fees			
		9. Name and Address of Cur	rent Registered Agent		10. Name and Address of New Registered Agent							
HEIDGERD, FREDRICK C					81 Name Dr. Al Meilm 82 Street Address (P.O. Box Number is Not Acceptable) 2 12 0 S J SZND LANE							
800 SE THIRD AVE SUITE 300					83	1						
FT LAUDERDALE FL 33316							mhation	F		317		
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 poth, 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, any accept the obligations of, Section 617.0503, Florida Statutes.												
SIGNATURE Signature, typed of printed fixme of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE												
1:	2.	OFFICERS	AND DIRECTORS	13.			ADDITIONS/CH/	ANGES TO OFFICERS				
П	rle	P	☐ DELETE	1.1 111	l.E	{	Director		Change	Addition		
NA	VAME SWABRIGHT, CAROLINE 1.2 N			ME								
STREET ADDRESS 500 SE 17TH ST 1.3 ST					REETA	DORESS						
CITY-ST-ZIP FT LAUDERDALE FL 3331614C				Y-ST-	ZIP							

Presiden+ Change ☐ Addition DELETE 2.1 TITLE TITLE RUTH, DOUG NAME 1212 NE 8TH AVE 2.3 STREET ADDRESS STREET ADDRESS FT LAUDERDALE FL 2. 4 CITY-ST-ZIP CITY-ST-ZIP [] Change ☐ Addition DELETE 31 TITLE TITLE 3.2 NAME MILLER, GEORGE NAME 299 NW 86TH TERRACE 3.3 STREET ADDRESS STREET ADDRESS CORAL SPRINGS FL 33071 3.4. CITY-ST-ZIP CITY-ST-ZIP Addition DELETE Director 4.1 TITE F TITLE TR NAME ARPAD, PAPP 4.2 NAME 4.3 STREET ADDRESS 1625 SE 10TH AVE #303 STREET ADDRESS FT LAUDERDALE FL 4.4 CITY-ST-ZIP CITY-ST-ZIP ☐ Addition DELETE 5.1 TITLE SD TITLE 52 NAME MEILAN, DR. A NAME 2120 SW 52ND LANE 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY-ST-ZIP **PLANTATION FL 33317** CITY-ST-ZIP Addition Change ☐ DELETE 6.1 TITLE President TITLE 6.2 NAME NAME 6.3 STREET ADDRESS STREET ADDRESS 33312 6.4 CITY-ST-ZIP CITY-ST-ZP

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:

Disciplation . RUTH