2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 02, 2006
Secretary of State

DOCUMENT# N33562

Entity Name: SUNSHINE CITY KIWANIS YOUTH FOUNDATION, INC. ST.PETERSBURG, FLORIDA

Current Principal Place of Business:

1850 CASTLE WOODS DR
CLEARWATER, FL 33759 US

New Principal Place of Business:

Current Mailing Address:

1850 CASTLE WOODS DR
CLEARWATER, FL 33759 US

New Mailing Address:

FEI Number: 59-2981032 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

HAMM, JOHN L JR
1850 CASTLE WOOD DR
CLEARWATER, FL 33759 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:	D	( ) Delete
Name:	KNOWLES, DON C	
Address:	918 MYAKKA CT NE	
City-St-Zip:	SAINT PETERSBURG, FL 33702	
Title:	PD	( ) Delete
Name:	ANDERS, JOHN A	
Address:	6554 28TH STREET NORTH	
City-St-Zip:	SAINT PETERSBURG, FL 33702	
Title:	SDT	( ) Delete
Name:	HAMM, JOHN L.,	
Address:	1850 CASTLE WOODS DR	
City-St-Zip:	CLEARWATER, FL 33759	
Title:	VD	( ) Delete
Name:	NICHOLSON, JUDITH A	
Address:	9860 45TH STREET NORTH	
City-St-Zip:	PINELLAS PARK, FL 33782	
Title:	D	( ) Delete
Name:	STRAWN, ELDON E	
Address:	8623 -15TH WAY N.	
City-St-Zip:	SAINT PETERSBURG, FL 33702	
Title:	VD	( ) Delete
Name:	HALL, ROBERT F	
Address:	4326 29TH AVENUE NORTH	
City-St-Zip:	SAINT PETERSBURG, FL 33713	

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 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: JOHN L. HAMM, JR. SDT 03/02/2006
Electronic Signature of Signing Officer or Director — Date