

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED
Jan 09, 2009
Secretary of State**

DOCUMENT# N37391

Entity Name: KIWANIS CLUB OF ST. AUGUSTINE CORPORATION

Current Principal Place of Business:

1797 OLD MOULTRIE RD
107
ST. AUGUSTINE, FL 320844166

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 637
ST. AUGUSTINE, FL 320850637

New Mailing Address:

FEI Number: 59-3017853 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

EBERLING, ROBERT CPA
1797 OLD MOULTRIE RD.
SUITE 107
SAINT AUGUSTINE, FL 320844166 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: TD () Delete
Name: EBERLING, ROBERT
Address: 437 BIG TREE RD
City-St-Zip: PONTE VEDRA BEACH, FL 32082

Title: PD () Delete
Name: GREINER, GREGORY R
Address: 929 LAKE SANFORD CT
City-St-Zip: ST AUGUSTINE, FL 32092

Title: SD () Delete
Name: SCAFF, SUSAN
Address: 5035 C R 208
City-St-Zip: SAINT AUGUSTINE, FL 32092

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: PD (X) Change () Addition
Name: BRATIC, ALAN
Address: 1332 KINSINGTON CT
City-St-Zip: ST AUGUSTINE, FL 32084

Title: SD (X) Change () Addition
Name: CLEMENTS, DEBORAH
Address: 207 SEGOVIA RD
City-St-Zip: SAINT AUGUSTINE, FL 32086

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: ROBERT A EBERLING

TD

01/09/2009

Electronic Signature of Signing Officer or Director

_____ Date