

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N47365

FILED
Jan 20, 2009
Secretary of State

Entity Name: KIWANIS CLUB OF GREENACRES & WESTERN COMMUNITIES, INC.

Current Principal Place of Business:

6428 LAKE WORTH ROAD
#604
LAKE WORTH, FL 33463 US

New Principal Place of Business:

Current Mailing Address:

6428 LAKE WORTH ROAD
#604
LAKE WORTH, FL 33463 US

New Mailing Address:

FEI Number: 65-0140616 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

FRITTS, ROBERT P.
5700 LAKE WORTH RD
SUITE 105
LAKE WORTH, FL 33463 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: P () Delete
Name: SHAW, CHARLES E
Address: 2252 SOUNDINGS CT
City-St-Zip: GREENACRES, FL 334132036

Title: VP () Delete
Name: MOORE, DOUGLAS
Address: 2641 GATELY DR WEST #1601
City-St-Zip: WEST PALM BEACH, FL 33415

Title: S () Delete
Name: KELLER, LISA
Address: 1966 TIGRESS DR
City-St-Zip: WEST PALM BEACH, FL 33411

Title: T () Delete
Name: LOFFREDO, MICHAEL
Address: 4235 FOXVIEW CRT
City-St-Zip: LAKE WORTH, FL 33467

Title: D () Delete
Name: FRIEDMAN, ESTELLE
Address: 3820 SOUTH 55TH AVE
City-St-Zip: GREENACRES, FL 33463

Title: D () Delete
Name: SHANE, JEFF
Address: 3286 ARCARA WAY #416
City-St-Zip: LAKE WORTH, FL 33467

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 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: CHARLES E SHAW

PRES

01/20/2009

Electronic Signature of Signing Officer or Director

Date