

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N47845

FILED
Feb 05, 2009
Secretary of State

Entity Name: KIWANIS CLUB OF VIERA, FLORIDA, INC.

Current Principal Place of Business:

1922 INDEPENDENCE AVE
MELBOURNE, FL 32940 US

New Principal Place of Business:

Current Mailing Address:

POB 411206
MELBOURNE, FL 32941 US

New Mailing Address:

FEI Number: 65-0196261 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

LANGGUTH, GEORGE S.
THE FLORIDA DISTRICT OF KIWANIS INTL
5545 BENCHMARK LANE
SANFORD, FL 32773 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: ADAMS, DON
Address: 6183 ANCHOR LANE
City-St-Zip: ROCKLEDGE, FL 32955

Title: S () Delete
Name: REIDEL, WILLIAM
Address: 1682 FRONTIER DR
City-St-Zip: MELBOURNE, FL 32940

Title: D () Delete
Name: DULANEY, JOHN
Address: 1022 JAN'S PLACE
City-St-Zip: MELBOURNE, FL 32940

Title: VP () Delete
Name: BRUBAKER, BETTY
Address: 1922 INDEPENDENCE AVE
City-St-Zip: MELBOURNE, FL 32940

Title: T () Delete
Name: BRUBAKER, JOSEPH
Address: 1922 INDEPENDENCE AVE
City-St-Zip: MELBOURNE, FL 32940

Title: D () Delete
Name: LEWIS, ROSALEE
Address: 3875 ST ANDRES CIR
City-St-Zip: MELBOURNE, FL 32940

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: VIRGENS, VIC
Address: 1060 MAYFLOWER AVENUE
City-St-Zip: MELBOURNE, FL 32940

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

Title: T (X) Change () Addition
Name: DULANEY, JOHN
Address: 1022 JAN'S PLACE
City-St-Zip: MELBOURNE, FL 32940

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

Title: P (X) Change () Addition
Name: BRUBAKER, JOSEPH D JR
Address: 1922 INDEPENDENCE AVE
City-St-Zip: MELBOURNE, FL 32940

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: JOSEPH D BRUBAKER JR

P

02/05/2009

Electronic Signature of Signing Officer or Director

Date