

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N48792

FILED  
Apr 23, 2009  
Secretary of State

**Entity Name:** THE CORAL GABLES KIWANIS YOUTH FOUNDATION, INC.

**Current Principal Place of Business:**

3971 S.W. 8TH STREET  
#308  
CORAL GABLES, FL 33134 US

**New Principal Place of Business:**

**Current Mailing Address:**

3971 S.W. 8TH STREET  
#308  
CORAL GABLES, FL 33134 US

**New Mailing Address:**

**FEI Number:** 59-6155158      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

HARRING, DANIEL E TRS  
7700 NORTH KENDALL DRIVE  
807  
MIAMI, FL 33156 US

**Name and Address of New Registered Agent:**

FARMER, DANIEL R TRS  
3971 SW 8TH STREET  
308  
CORAL GABLES, FL 33134 US

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: DANIEL R FARMER

04/23/2009

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: ADAMS, BILL  
Address: 7152 S.W. 66 STREET  
City-St-Zip: MIAMI, FL 33143

Title: V ( ) Delete  
Name: GLASSER, AARON  
Address: 90 EDGEWATER DRIVE - PH 26  
City-St-Zip: CORAL GABLES, FL 33133 US

Title: S ( ) Delete  
Name: KELLNER, DOUG  
Address: 3119 PONCE DE LEON BLVD., #A  
City-St-Zip: CORAL GABLES, FL 33134 US

Title: T ( ) Delete  
Name: FARMER, DANIEL  
Address: 3971 S.W. 8TH STREET, #308  
City-St-Zip: CORAL GABLES, FL 33134 US

**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:

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: DANIEL R FARMER

TRS

04/23/2009

Electronic Signature of Signing Officer or Director

Date