2008 NOT-FOR-PROFIT CORPORATION **ANNUAL REPORT (AR)**

Sep 03, 2008 8:00 am Secretary of State DOCUMENT # N48796 1. Entity Name 09-03-2008 90005 019 ****61.25 K!WANIS CLUB OF BOCA RATON-SUNRISE, INC. Principal Place of Business Mailing Address 9551 PARKVEIW AVE P.O. BOX 1545 **BOCA RATON FL 33428 BOCA RATON FL 33429** 2. Principal Place of Business - No P.O. Box # 3. Mailing Address 899 ENFIELD ST Suite, Apt. #, etc. Suite, Apt. #, etc. 2nd MOORE CR2E037 (4/08) City & State City & State 4. FEI Number Applied For 59-6168896 BOCA RATON Not Applicable Country Zip Country \$8.75 Additional 5. Certificate of Status Desired USA Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent TOM THAYER MICHEL, HARRY Street Address (P.O. Box Number is Not Acceptable) 9551 PARKVIEW AVE **BOCA RATON FL 33428** Zip Code BOCA RATON 33487 8. 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. I am familiar with, and accept the obligations of egistered agent SIGNATURE (NOTE: Registered Agent signature required when reinstating) Signature, lyped or printed name of registered agent and title if applicable FILE NOW: FEE IS \$61.25 9. Election Campaign Financing \$5.00 May Be Make Check Payable to Trust Fund Contribution. Due By September 3, 2008 Added to Fees Florida Department of State 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 11. TITLE ☐ Delete TITLE \mathcal{D} Change ■ Addition BANAEIAN, JAMES NAME NAME 4400 NORTH FEDERAL HWY SUITE 1 STREET ADDRESS STREET ADDRESS **BOCA RATON FL 33431** CITY-ST-ZIP CITY-ST-ZIP SD M Delete ☐ Change M Addition MICHEL, HARRY **ELKE SCHMIDT** NAME 9551 PARKVIEW AVE 1452 S.E. 57 PLACE STREET ADDRESS STREET ADDRESS **BOCA RATON FL 33428** CITY - ST- ZIP CITY-ST-ZIP DEERFIELD BEACH, FL TITLE' THIE Delete: 🗀 change — 🛅 Abdnion NAME THAYER, TOM NAME 899 ENFIELD STREET STREET ADDRESS STREET ADDRESS **BOCA RATON FL 33487** CITY-S1-ZIP CITY-ST-ZIP ☐ Delete TITLE ÞΝ Change Change Addition NAME KEN HARRIS 1945 NW 47 Ave, #31 STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP BOCARATON, PL ☐ Delete TITLE ☐ Change TITLE ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP

FILED

I hereby certify that the information supplied with this filling does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if TOM THAYER TREASURER 8/27/08 SIGNATURE