

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N48796

FILED  
Feb 03, 2009  
Secretary of State

Entity Name: KIWANIS CLUB OF BOCA RATON, INC.

**Current Principal Place of Business:**

899 ENFIELD ST  
BOCA RATON, FL 33487 US

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 1545  
BOCA RATON, FL 33429 US

**New Mailing Address:**

P.O. BOX 1845  
BOCA RATON, FL 33429 US

FEI Number: 59-6168896

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

THAYER, TOM  
899 ENFIELD ST  
BOCA RATON, FL 33487 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: D ( ) Delete  
Name: BANAEIAN, JAMES  
Address: 4400 NORTH FEDERAL HWY SUITE 1  
City-St-Zip: BOCA RATON, FL 33431

Title: TD ( ) Delete  
Name: THAYER, TOM  
Address: 899 ENFIELD STREET  
City-St-Zip: BOCA RATON, FL 33487

Title: SD ( ) Delete  
Name: SCHMIDT, ELKE  
Address: 1452 SE 5TH PLACE  
City-St-Zip: DEERFIELD BEACH, FL 33441

Title: PD ( ) Delete  
Name: HARRIS, KEN  
Address: 1945 NW 4TH AVE #31  
City-St-Zip: BOCA RATON, FL 33432

**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: TOM THAYER

TREA

02/03/2009

Electronic Signature of Signing Officer or Director

Date