

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N49091

FILED  
Apr 22, 2009  
Secretary of State

**Entity Name:** KIWANIS CLUB OF RIVIERA BEACH, FLORIDA, INC.

**Current Principal Place of Business:**

8295 N. MILITARY TRAIL  
SUITE A  
PALM BEACH GARDENS, FL 33410 US

**New Principal Place of Business:**

**Current Mailing Address:**

8295 N. MILITARY TRAIL  
SUITE A  
PALM BEACH GARDENS, FL 33410 US

**New Mailing Address:**

**FEI Number:** 65-0384953

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

HORVATH, DAVID E  
8295 N MILITARY TRL.  
STE. A  
PALM BEACH GARDENS, FL 334106312 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: PD ( ) Delete  
Name: DILLINGHAM, ROBERT  
Address: 619 NORTHLAKE BLVD  
City-St-Zip: NORTH PALM BEACH, FL 33408 US

Title: TD ( ) Delete  
Name: HARPER, ANNA M  
Address: 626 W KALMIA DR  
City-St-Zip: LAKE PARK, FL 334032110

Title: D ( ) Delete  
Name: SCHANEL, GLENN  
Address: 4600 MILITARY TRAIL SUITE 215  
City-St-Zip: JUPITER, FL 33458

Title: SD ( ) Delete  
Name: ELLIS, JAN  
Address: 12184 ALDER LANE  
City-St-Zip: WELLINGTON, FL 33414

Title: D ( ) Delete  
Name: HORVATH, DAVID  
Address: 2550 HOPE LANE W  
City-St-Zip: PALM BEACH GARDENS, FL 33410

Title: D ( ) Delete  
Name: SCHUEMANN, BOB  
Address: 2586 PEPPERWOOD CIRCLE  
City-St-Zip: PALM BEACH GARDENS, FL 33410

**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: DAVID E. HORVATH

D

04/22/2009

Electronic Signature of Signing Officer or Director

Date