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Secretary of State

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NONPROFIT  
CORPORATION  
ANNUAL REPORT  
1999



FLORIDA DEPARTMENT OF STATE  
**Katherine Harris**  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # N49309

1. Corporation Name

KIWANIS CLUB OF FORT LAUDERDALE - CORAL RIDGE FOUNDATION, INC.

Principal Place of Business

% DAVID W. CRANE  
2787 E. OAKLAND PARK BLVD., STE. 404  
FORT LAUDERDALE FL 33306

Mailing Address

% DAVID W. CRANE  
2787 E. OAKLAND PARK BLVD., STE. 404  
FORT LAUDERDALE FL 33306



2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

Country

24

25

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

Country

29

30

3. Date Incorporated or Qualified

06/08/1992

4. FEI Number

65-0339645

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional  
Fee Required

6. Election Campaign Financing

☐

Trust Fund Contribution

\$5.00 May Be  
Added to Fees

9. Name and Address of Current Registered Agent

CRANE, DAVID W.  
2787 E. OAKLAND PARK BLVD.  
SUITE 404  
FORT LAUDERDALE FL 33306

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85

Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE DP ☐ DELETE

NAME CRANE, DAVID W.  
STREET ADDRESS 1727 N.E. 38 ST.  
CITY-ST-ZIP OAKLAND PARK FL

TITLE DV ☐ DELETE

NAME DEBRUNNER, LARRY  
STREET ADDRESS 3819 N.W. 35 ST.  
CITY-ST-ZIP COCONUT CREEK FL

TITLE DS ☐ DELETE

NAME HARRIS, HUGH  
STREET ADDRESS 5800 N.E. 21 TERR.  
CITY-ST-ZIP FT LAUDERDALE FL

TITLE DT ☐ DELETE

NAME ANSON, LARRY  
STREET ADDRESS 265 S.W. 87 TERR.  
CITY-ST-ZIP PLANTATION FL

TITLE D ☐ DELETE

NAME PESEK, JOE  
STREET ADDRESS 2732 N.E. 26 ST.  
CITY-ST-ZIP FT LAUDERDALE FL

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *[Signature]* SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

01-06-99

Date

954-585-4848

Daytime Phone #

CR2E037 (11/98)