

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N93000003712

FILED
May 01, 2009
Secretary of State

Entity Name: BROOKSVILLE KIWANIS CLUB FOUNDATION, INC.

Current Principal Place of Business:

101 S. MAIN STREET
BROOKSVILLE, FL 34601

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 1900
BROOKSVILLE, FL 346051900

New Mailing Address:

FEI Number: 59-3203940 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

MASON, JR., JOSEPH M ESQ.
101 S. MAIN STREET
BROOKSVILLE, FL 34601 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: P () Delete
Name: ODPEDAL, DARREL
Address: 3358 AUGUSTINE ROAD
City-St-Zip: SPRING HILL, FL 34609

Title: VD () Delete
Name: WHEELERS, RON
Address: 19496 CORTEX BLVD
City-St-Zip: BROOKSVILLE, FL 34601

Title: T () Delete
Name: HAMMATT, SHIRLEY
Address: 80 LARK AVE
City-St-Zip: BROOKSVILLE, FL 34601

Title: D () Delete
Name: SMITH, SCOTT
Address: P.O. BOX 1473
City-St-Zip: BROOKSVILLE, FL 346051473

Title: D () Delete
Name: NIKKINEN, NICK
Address: 196 LACK AVE
City-St-Zip: BROOKSVILLE, FL 34601

Title: D (X) Delete
Name: BEASLEY, KAREN
Address: 438 HAMLIN WAY
City-St-Zip: BROOKSVILLE, FL 34601

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: ODPEDAL, DARREL
Address: 3358 AUGUSTINE ROAD
City-St-Zip: SPRING HILL, FL 34609

Title: VD (X) Change () Addition
Name: WHEELER, RON
Address: 19496 CORTEZ BLVD
City-St-Zip: BROOKSVILLE, FL 34601

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change () Addition
Name: BEASLEY, KAREN
Address: 438 HAMLIN WAY
City-St-Zip: BROOKSVILLE, FL 34601

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: SHIRLEY HAMMATT

D

05/01/2009

Electronic Signature of Signing Officer or Director

Date