

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N94000001516

FILED
Apr 24, 2008
Secretary of State

Entity Name: KIWANIS CLUB COLOMBIA-U.S.A. FOUNDATION, INC.

Current Principal Place of Business:

1538 BIRD ROAD
CORAL GABLES, FL 33146 US

New Principal Place of Business:

Current Mailing Address:

PO BOX 43-0748
SOUTH MIAMI, FL 33243 US

New Mailing Address:

FEI Number: 65-0589413 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

VELANDIA, WILSON
6065 NW 167ST B15
MIAMI LAKES, FL 33015 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: BARROS, PIEDAD
Address: 1538 BIRD ROAD
City-St-Zip: CORAL GABLES, FL 33146

Title: D () Delete
Name: VELANDIA, MERCY
Address: P.O. BOX 430748
City-St-Zip: SOUTH MIAMI, FL 33243

Title: P () Delete
Name: VILLEGAS, JAIME
Address: 10720 NW 66 STREET, APT501D
City-St-Zip: MIAMI, FL 33178

Title: SD () Delete
Name: GIRALDO, CRISTINA
Address: P.O. BOX 430748
City-St-Zip: SOUTH MIAMI, FL 33243

Title: TD () Delete
Name: CABALLERO, MARY A
Address: P.O. BOX 430748
City-St-Zip: SOUTH MIAMI, FL 33243

Title: D () Delete
Name: LOZANO, ANTENOR
Address: P.O. BOX 430748
City-St-Zip: SOUTH MIAMI, FL 33243

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: D (X) Change () Addition
Name: VILLEGAS, JAIME
Address: 10720 NW 66 STREET, APT501D
City-St-Zip: MIAMI, FL 33178

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

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

Title: P (X) Change () Addition
Name: BARROS, LUIS
Address: P.O. BOX 430748
City-St-Zip: SOUTH MIAMI, FL 33243

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: MARY CABALLERO

TD

04/24/2008

Electronic Signature of Signing Officer or Director

Date