


2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Aug 09, 2007 8:00 am
Secretary of State

08-09-2007 90053 033 ****70.00

DOCUMENT # N94000001707					
1. Entity Name KIWANIS CLUB OF GREATER BRANDON FOUNDATION, INC.					
Principal Place of Business 5930 JAEGERGLEN DRIVE LITHIA, FL 33547 US			Mailing Address P. O. BOX 581 BRANDON, FL 33509-0581 US		
2. Principal Place of Business - No P.O. Box # 815 PROVIDENCE RD		3. Mailing Address Suite, Apt. #, etc.			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State BRANDON, FL		City & State		4. FEI Number 59-3374183	
Zip 33511		Country USA		5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent BEST, CHRISTIE L 5930 JAEGERGLEN DRIVE LITHIA, FL 33547			7. Name and Address of New Registered Agent Name: JIM POWELL Street Address (P.O. Box Number is Not Acceptable): 2008 CAPRI RD City: VALRICO FL Zip Code: 33594-6712		
8. 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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE: <u>Jim Powell</u> <u>JIM POWELL SECRETARY</u> <u>AUGUST 2, 2007</u> <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>					
Filing Fee is \$61.25 Due by September 14, 2007		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees		Make check payable to Florida Department of State	
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE S NAME BEST, CHRISTIE L STREET ADDRESS 5930 JAEGERGLEN DRIVE CITY-ST-ZIP LITHIA, FL 33547	<input checked="" type="checkbox"/> Delete		TITLE S NAME JIM POWELL STREET ADDRESS 2008 CAPRI RD CITY-ST-ZIP VALRICO, FL 33594-6712	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE P NAME AMATANGELO, DUSTIE STREET ADDRESS 10340 ASHLEY OAKS DR CITY-ST-ZIP RIVERVIEW, FL 33569	<input type="checkbox"/> Delete		TITLE T NAME JULIE KULLREK STREET ADDRESS 10817 PROVIDENCE OAKS DR CITY-ST-ZIP RIVERVIEW, FL 33578	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
TITLE D NAME JENKINS, EDDIE L STREET ADDRESS 2712 BRIAR PATCH CITY-ST-ZIP VALRICO, FL 33594	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP 	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE D NAME SALMON, SUSAN STREET ADDRESS 764 BURLWOOD ST CITY-ST-ZIP BRANDON, FL 33511	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP 	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE D NAME SOTO, CARLOS STREET ADDRESS 5705 EAGLE POINT PL. CITY-ST-ZIP LITHIA, FL 33547	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP 	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE D NAME POWELL, JIM STREET ADDRESS 2008 CARRY RD CITY-ST-ZIP VALRICO, FL 33594	<input checked="" type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP 	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: <u>Jim Powell</u> <u>JIM POWELL</u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>			<u>AUGUST 2, 2007</u> <small>Date</small>		<u>(813) 299-3871</u> <small>Daytime Phone #</small>