

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N94000001707

FILED
Apr 09, 2008
Secretary of State

Entity Name: KIWANIS CLUB OF GREATER BRANDON FOUNDATION, INC.

Current Principal Place of Business:

815 PROVIDENCE RD
BRANDON, FL 33511 US

New Principal Place of Business:

Current Mailing Address:

P. O. BOX 581
BRANDON, FL 335090581 US

New Mailing Address:

FEI Number: 59-3374183

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

POWELL, JIM
2008 CAPRI RD
VALRICO, FL 33594 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: S () Delete
Name: POWELL, JIM
Address: 2008 CAPRI RD
City-St-Zip: VALRICO, FL 33594 US

Title: P () Delete
Name: AMATANGELO, DUSTIE
Address: 10340 ASHLEY OAKS DR
City-St-Zip: RIVERVIEW, FL 33569

Title: D () Delete
Name: JENKINS, EDDIE L
Address: 2712 BRIAR PATCH
City-St-Zip: VALRICO, FL 33594

Title: D () Delete
Name: SALMON, SUSAN
Address: 764 BURLWOOD ST
City-St-Zip: BRANDON, FL 33511

Title: D () Delete
Name: SOTO, CARLOS
Address: 5705 EAGLE POINT PL.
City-St-Zip: LITHIA, FL 33547

Title: T () Delete
Name: KNUREK, JULIE
Address: 10817 PROVIDENCE DR
City-St-Zip: RIVERVIEW, FL 33578

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: JENKINS, EDDIE L
Address: 2712 BRIAR PATCH DR
City-St-Zip: VALRICO, FL 33594

Title: D (X) Change () Addition
Name: GERARDI, KAREN E
Address: 4032 WATERCOVE DRIVE
City-St-Zip: RIVERVIEW, FL 33569

Title: D (X) Change () Addition
Name: BREDBENNER, WILLIAM C
Address: 725 JUNE LAKE LANE
City-St-Zip: BRANDON, FL 33510

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: JIM POWELL

S

04/09/2008

Electronic Signature of Signing Officer or Director

Date