

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED

Jan 29, 2007 08:00 AM
Secretary of State

DOCUMENT # N95000000954

1. Entity Name

THE KIWANIS CLUB OF HYPOLUXO-LANTANA SUNRISE, INC.



Principal Place of Business

Mailing Address

**C/O SHARON RANDOLPH
114 PARK LANE EAST
HYPOLUXO FL 33462**

**C/O SHARON RANDOLPH
114 PARK LANE EAST
HYPOLUXO FL 33462**



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

65-0580203

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

1st MOORE

CR2E037 (10/06)

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**RANDOLPH, SHARON
114 PARK LANE EAST
HYPOLUXO FL 33462**

Name

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

City

FL

Zip Code

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

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

(NOTE: Registered Agent signature required when reappointing)

DATE

**FILE NOW: FEE IS \$61.25
Due By May 1, 2007**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

**Make Check Payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE	D	<input type="checkbox"/> Delete
NAME	RANDOLPH, SHARON	
STREET ADDRESS	114 PARK LANE EAST	
CITY- ST- ZIP	HYPOLUXO FL 33462	
TITLE	S	<input type="checkbox"/> Delete
NAME	SIMON, KENNETH	
STREET ADDRESS	7531 DUNCREST ROAD	
CITY- ST- ZIP	LAKE WORTH FL 33467	
TITLE	D	<input type="checkbox"/> Delete
NAME	ZELENKO, RUBIN	
STREET ADDRESS	4694 FOUNTAINS DR. S.	
CITY- ST- ZIP	LAKEWORTH FL 33467	
TITLE	D	<input type="checkbox"/> Delete
NAME	RANDOLPH, ROBERT W	
STREET ADDRESS	114 PARK LANE EAST	
CITY- ST- ZIP	HYPOLUXO FL 33462	
TITLE	PD	<input type="checkbox"/> Delete
NAME	CECERE, RON	
STREET ADDRESS	710 W. OCEAN AVENUE	
CITY- ST- ZIP	LANTANA FL 33462	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY- ST- ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY- ST- ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
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TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY- ST- ZIP		

**U000000607007
01/31/07-80020-004 61.25**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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: *Sharon Randolph* **Sharon Randolph**

1-22-07

561-582-1175