

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000000954

FILED  
Jan 09, 2009  
Secretary of State

**Entity Name:** THE KIWANIS CLUB OF HYPOLUXO-LANTANA SUNRISE, INC.

**Current Principal Place of Business:**

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

**New Principal Place of Business:**

**Current Mailing Address:**

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

**New Mailing Address:**

**FEI Number:** 65-0580203

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

RANDOLPH, SHARON  
114 PARK LANE EAST  
HYPOLUXO, FL 33462 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: ST ( ) Delete  
Name: RANDOLPH, SHARON  
Address: 114 PARK LANE EAST  
City-St-Zip: HYPOLUXO, FL 33462

Title: D ( ) Delete  
Name: ZELENKO, RUBIN  
Address: 4694 FOUNTAINS DR. S.  
City-St-Zip: LAKEWORTH, FL 33467

Title: D ( ) Delete  
Name: RANDOLPH, ROBERT W  
Address: 114 PARK LANE EAST  
City-St-Zip: HYPOLUXO, FL 33462

Title: D ( ) Delete  
Name: CECERE, RON  
Address: 710 W. OCEAN AVENUE  
City-St-Zip: LANTANA, FL 33462

Title: P ( ) Delete  
Name: PHILLIPS, CALVIN  
Address: 114 PARK LAND EAST  
City-St-Zip: LAKE WORTH, FL 33462

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

Title: D (X) Change ( ) Addition  
Name: ZELENKO, RUBIN  
Address: 5795 FOUNTAINS DR. S.  
City-St-Zip: LAKE WORTH, FL 33467

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

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

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: SHARON RANDOLOPH

SEC

01/09/2009

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date