

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000001757

FILED  
Feb 17, 2010  
Secretary of State

**Entity Name:** KIWANIS CLUB OF MELBOURNE, FLORIDA, FOUNDATION, INC.

**Current Principal Place of Business:**

1795 WEST NASA BLVD  
MELBOURNE, FL 32901

**New Principal Place of Business:**

1795 WEST NASA BLVD  
MELBOURNE, FL 329012611 US

**Current Mailing Address:**

P.O. BOX 1234  
MELBOURNE, FL 329021234

**New Mailing Address:**

PO BOX 1234  
MELBOURNE, FL 329021234 US

**FEI Number:** 59-3549575

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

KANCILIA, JOHN R  
1795 WEST NASA BLVD  
MELBOURNE, FL 32901 US

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

KANCILIA, JOHN R  
1795 WEST NASA BLVD  
MELBOURNE, FL 329012611 US

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:

02/17/2010

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: DS  
Name: LOPEZ, LOTTE  
Address: 1214 BANANA RIVER DR.  
City-St-Zip: INDIAN HARBOUR BEACH, FL 32937

Title: D  
Name: FORSTALL, CINDY  
Address: 311 AVENIDA DEL MAR  
City-St-Zip: INDIALANTIC, FL 329032811

Title: DV  
Name: GUTJAHR, POKEY  
Address: 759 BEACON ST NW  
City-St-Zip: PALM BAY, FL 329079048 US

Title: DT  
Name: PARRISH, DENWOOD B  
Address: 2054 CHERRYWOOD DR  
City-St-Zip: MELBOURNE, FL 329355517 US

Title: D  
Name: LOCKETT, WILLIAM T  
Address: 682 BLOKE AVE  
City-St-Zip: PALM BAY, FL 329094654 US

Title: DP  
Name: PARENTE, SALLY  
Address: 2035 LANSING ST  
City-St-Zip: MELBOURNE, FL 329352173 US

I hereby 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 all other like empowered.

SIGNATURE: DENWOOD B. PARRISH

DT

02/17/2010

Electronic Signature of Signing Officer or Director

Date