

2025 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 722019

Entity Name: KIWANIS CLUB OF SOUTHSORE, SUN CITY CENTER, FL, INC.**Current Principal Place of Business:**109 2ND ST NW
RUSKIN, FL 33570**Current Mailing Address:**P.O. BOX 5753
SUN CITY CENTER, FL 33571 US**FEI Number:** 23-7190587**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**BREDBENNER, SUZANNE
109 2ND ST NW
RUSKIN, FL 33570 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:** SUZANNE BREDBENNER

03/13/2025

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PRESIDENT
Name BREDBENNER, SUZANNE
Address 109 2ND STREET NW
City-State-Zip: RUSKIN FL 33570

Title TREASURER
Name BENNETT, KAREN
Address 1117 KINGFISH PLACE
City-State-Zip: APOLLO BEACH FL 33572

Title ASSISTANT TREASURER
Name CRAIG, ELIZABETH H
Address 1106 KINGFISH PLACE
City-State-Zip: APOLLO BEACH FL 33572

Title SECRETARY
Name PRZEKOP, KIM
Address 1822 MIRA LAGO CIR
City-State-Zip: RUSKIN FL 33570

Title DIRECTOR
Name BRADEN, SHARON
Address 1426 LELAND DR
City-State-Zip: SUN CITY CENTER FL 33573

Title DIRECTOR
Name BALL, MICHAEL
Address 6941 CRESTPOINT DR
City-State-Zip: APOLLO BEACH FL 33572

Title ASST. SECRETARY
Name BREDBENNER, WILLIAM C
Address 109 2ND ST NW
City-State-Zip: RUSKIN FL 33570

Title DIRECTOR
Name JOSHUA, BENNETT
Address 12937 BROOKSIDE MOSS DRIVE
City-State-Zip: RIVERVIEW FL 33579

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: KAREN M BENNETT**TREASURER**

03/13/2025

Electronic Signature of Signing Officer/Director Detail

Date