

2019 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:**1358 EMERALD DUNES DR
SUN CITY CENTER, FL 33573**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:**GROVES, IDA F
1358 EMERALD DUNES DR
SUN CITY CENTER, FL 33573 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:** IDA F GROVES

01/26/2019

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PRESIDENT
Name COBURN, ANNAFE
Address 12013 CITRUS LEAF DR
City-State-Zip: GIBSONTOWN FL 33534

Title TREASURER
Name GROVES, IDA F
Address 1358 EMERALD DUNES DR
City-State-Zip: SUN CITY CENTER FL 33573

Title DIRECTOR, 2018-2021
Name BROWN, VALESCA
Address 429 NOBLE FAIRE DR
City-State-Zip: SUN CITY CENTER FL 33573

Title DIRECTOR
Name BIBISI, RAY
Address 2007 HALMROCK PL
City-State-Zip: SUN CITY CENTER FL 33573

Title VP
Name AMNAY, DREW
Address 6542 N US HIGHWAY 41
City-State-Zip: APOLLO BEACH FL 33572

Title SECRETARY
Name MONTGOMERY, SUSAN
Address 1630 BENTWOOD DR
City-State-Zip: SUN CITY CENTER FL 33573

Title ASST. TREASURER
Name MONTGOMERY, TOM
Address 1630 BENTWOOD DR
City-State-Zip: SUN CITY CENTER FL 33573

Title DIRECTOR
Name BAITY, MARVIN
Address 14244 ALLSTAR MANOR DR
City-State-Zip: WIMAUMA FL 33598

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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: IDA GROVES

TREASURER

01/26/2019

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title	PAST PRESIDENT
Name	MONTGOMERY, SUSAN
Address	1630 BENTWOOD DR
City-State-Zip:	SUN CITY CENTER FL 33573