2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 722019

Entity Name: KIWANIS CLUB OF SOUTHSHORE, SUN CITY CENTER, FL, INC.

FILED
Jan 19, 2021
Secretary of State
2665491593CC

Current Principal Place of Business:

1106 KINGFISH PLACE APOLLO BEACH, FL 33572

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:

CRAIG, ELIZABETH H 1106 KINGFISH PLACE APOLLO BEACH, FL 33572 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: ELIZABETH H. CRAIG 01/19/2021

Electronic Signature of Registered Agent

Date

Officer/Director Detail:

Title	PAST PRESIDENT	Title	DIRECTOR
Name	CRAIG, ELIZABETH H	Name	AMNAY, DREW

Address 1106 KINGFISH PLACE Address 6542 N US HIGHWAY 41

City-State-Zip: APOLLO BEACH FL 33572 City-State-Zip: APOLLO BEACH FL 33572

Title TREASURER Title DIRECTOR, 2018-2021

Name CRAIG, ELIZABETH H Name BIBISI, RAY

Address 1106 KINGFISH PLACE Address 2007 HALMROCK PLACE

City-State-Zip: APOLLO BEACH FL 33572 City-State-Zip: SUN CITY CENTER FL 33573

Title SECRETARY Title PRESIDENT

Name PRZEKOP, KIM Name BIBISI, GRACE

Address 1822 MIRA LAGO CIR Address 2007 HALMROCK PLACE
City-State-Zip: RUSKIN FL 33570 City-State-Zip: APOLLO BEACH FL 33572

Title VP Title ASST. TREASURER
Name GINLEY, PATRICIA Name GROVES, IDA F

Address 1340 EMERALD DUNES DR Address 811 REGAL MANOR WAY

City-State-Zip: SUN CITY CENTER FL 33573 City-State-Zip: SUN CITY CENTER FL 33573

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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: ELIZABETH H. CRAIG TREASURER 01/19/2021

Officer/Director Detail Continued:

Title DIRECTOR, 2020-2022 Title DIRECTOR, 2020-2022

Name BRADEN, THOMAS Name PRZEKOP, KYLE

Address 1426 LELAND DR Address 1822 MIRA LAGO CIR

City-State-Zip: SUN CITY CENTER FL 33573 City-State-Zip: RUSKIN FL 33570

Title PRESIDENT ELECT
Name PRZEKOP, KIM

Address 1822 MIRA LAGO CIR

City-State-Zip: RUSKIN FL 33570