2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 17, 2018
Secretary of State
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Entity Name: CENTRAL BROWARD KIWANIS FOUNDATION, INC.

Current Principal Place of Business:

665 SW 27 AVENUE
SUITE 16
FT. LAUDERDALE, FL, FL 33312

Current Mailing Address:

P. O. BOX 100948
FT. LAUDERDALE, FL 33310

FEI Number: 27-3145256

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

MCCLEARY, MEREDITH
2201 NW 34 AVE.
LAUDERDALE LAKES, FL 33311 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:

Electronic Signature of Registered Agent — Date

Officer/Director Detail :

Title	TRUSTEE
Name	HUNTER, JULIE
Address	P. O. BOX 100948
City-State-Zip:	FT. LAUDERDALE FL 33310

Title	PRESIDENT
Name	COLEMAN, JENNINGS
Address	3011 NW 24 ST
City-State-Zip:	FORT LAUDERDALE FL 33311

Title	VP
Name	DINKINS, PAMELA
Address	P. O. BOX 100948
City-State-Zip:	FT. LAUDERDALE FL 33310

Title	TRUSTEE
Name	MCGRAW, BRUCE
Address	P. O. BOX 100948
City-State-Zip:	FT. LAUDERDALE FL 33310

Title	TREASURER
Name	ROBERTS, LOUIS
Address	P. O. BOX 100948
City-State-Zip:	FT. LAUDERDALE FL 33310

Title	SECRETARY
Name	BATTLE , SAMUEL
Address	P. O. BOX 100948
City-State-Zip:	FT. LAUDERDALE FL 33310

Title	PRESIDENT-ELECT
Name	KING, WILHELMINA DR.
Address	P. O. BOX 100948
City-State-Zip:	FT. LAUDERDALE FL 33310

Title	TRUSTEE
Name	BAYLOR, ESTHER
Address	P. O. BOX 100948
City-State-Zip:	FT. LAUDERDALE FL 33310

Continues on page 2

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: BRIAN C JOHNSON EXECUTIVE DIRECTOR 04/17/2018

Electronic Signature of Signing Officer/Director Detail — Date

Officer/Director Detail Continued :

Title	EXECUTIVE DIRECTOR
Name	JOHNSON, BRIAN C
Address	665 SW 27 AVENUE SUITE 16
City-State-Zip:	FT. LAUDERDALE, FL FL 33312