

2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000002963

Entity Name: KIWANIS CLUB OF FORT PIERCE, INC.**Current Principal Place of Business:**7818 LONG COVE WAY
PORT ST LUCIE, FL 34986**Current Mailing Address:**P O BOX 957
FT. PIERCE, FL 34954**FEI Number:** 59-6151475**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**HOLMES, DONALD R
7818 LONG COVE WAY
PORT ST LUCIE, FL 34986 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	PRESIDENT
Name	KEELING, KEVIN
Address	7062 MAIDSTONE DR
City-State-Zip:	PORT ST LUCIE FL 34986

Title	D
Name	PERONA, TOM
Address	P.O. BOX 12189
City-State-Zip:	FT. PIERCE FL 34979

Title	S
Name	GEHRIG, ROBERT
Address	2902 SERENITY CIRCLE
City-State-Zip:	FORT PIERCE FL 34981

Title	D
Name	ABRAMOWICZ, BILL
Address	206 SOUTH 6TH
City-State-Zip:	FORT PIERCE FL 34950

Title	DIRECTOR
Name	BOEDICKER, TOM
Address	38 VISTA GARDENS DR
City-State-Zip:	VERO BEACH FL 32960

Title	T
Name	HOLMES, DONALD
Address	7818 LONG COVE WAY
City-State-Zip:	PT ST LUCIE FL 34986

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: DONALD R HOLMES

T

03/08/2016

Electronic Signature of Signing Officer/Director Detail_____
Date