2006 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# 701962

FILED Sep 22, 2006 Secretary of State

Entity Name: THE KIWANIS CLUB OF VENICE INC

Current Principal Place of Business:			New Prince	New Principal Place of Business:		
101 WEST STE. 10	VENICE AVE	<u>=</u> .				
VENICE, F	FL 34285					
Current Mailing Address:			New Maili	New Mailing Address:		
101 WEST STE. 10 VENICE, F	VENICE AVE L 34285	≣.				
FEI Number	: 59-6152218	FEI Number Applied For ()	FEI Number Not App	licable ()	Certificate of Status Desired ()	
Name and	Address of	Current Registered Agent:	Name and	l Address o	of New Registered Agent:	
	L, THOMAS E VENICE AVE		101 WEST	TRAMMELL, THOMAS B 101 WEST VENICE AVE. STE. 10		
	FL 34285` US	3		FL 34285 U	JS	
	named entity e of Florida.	submits this statement for the	ourpose of changing	its registere	d office or registered agent, or both,	
SIGNATUI	RE: THOMAS	S B TRAMMELL			09/22/2006	
	Electro	nic Signature of Registered Ag	ent		Date	
OFFICER	S AND DIREC	CTORS:	ADDITION	NS/CHANG	ES TO OFFICERS AND DIRECTORS	
Title: Name: Address: City-St-Zip:	S (CARSON, DAL 564 CATALINA VENICE, FL 3	AIS. CIR	Title: Name: Address: City-St-Zip:		() Change () Addition	
Title: Name: Address: City-St-Zip:	TD (TRAMMELL, T 418 GULF ST. VENICE, FL 3		Title: Name: Address: City-St-Zip:		() Change () Addition	
Title: Name: Address: City-St-Zip:	STEPHAN, TH		Title: Name: Address: City-St-Zip:		() Change () Addition	
Title: Name: Address: City-St-Zip:	HUNTLEY, RE 7271 BALLAR		Title: Name: Address: City-St-Zip:		(X) Change () Addition CRUSINBERRY I RUBINS DR. FL 34275	
Title: Name: Address: City-St-Zip:	VP (ROSENTHAL, 452 SOUTH C OSPREY, FL	REEK DRIVE	Title: Name: Address: City-St-Zip:	VP HELEN, STE 1707 BELVI ENGLEWOO		
Title: Name: Address: City-St-Zip:	D (HALLSTEN, K 1432 SUSSEX VENICE, FL 3	RD.	Title: Name: Address: City-St-Zip:	D MCCONNEL 231 AIRPOR VENICE, FL	RT AVE. EAST #412	

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: THOMAS B TRAMMELL TD 09/22/2006