2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR) DOCUMENT # 709246 1. Entity Name KIWANIS CLUB OF ROCKLEDGE, INC. Principal Place of Business C/O MRS. EDIE WALTON 29 HARDEE CIRCLE SOUTH ROCKLEDGE FL 32955 US 2. Principal Place of Business OF HARDEN Suite, Apt. #, etc. Suite, Apt. #, etc. City & State City & State Country Zip Country Suite, Apt. # etc. Country Country Size Country Country Country Size Country C

FILED Apr 22, 2003 8:00 am Secretary of State

04-22-2003 90059 039 ****61.25

US							
2. Principal Place of Business HARRY MUNCH]			
Suite, Apt. #, etc. 5300 CURHS BLV	OCURHS BLW Suite, Apt. #, etc.			☐ CHECK HERE IF MAKING CHANGES			
CocoA, Fl	City & State		4. FEI Number 59-6168944 Applied For Not Applicable				
3a9a7 USA	Zip Country		5. Certificate of Status Desired \$8.75 Additional Fee Required				
6. Name and Address of Cu	7. Name and Address of New Registered Agent						
WALTON, EDITH M 29 HARDEE CIRCLE SO	Name Street Address (Name ### ALLY MUNCH. Street Address (P.O. Box Number is Not Acceptable)					
ROCKLEDGE FL 32955	5200 0 . DAIS DILL						
NOCKLEDGE I E 32333	0300 CURTIS BLUE						
. 3			ZOA	FL	Zip Code 399	27	
8. 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. I am familiar with, and accept							
the obligations of registered agent.	Muney)///						
HAINY			4/17/03				
SIGNATURE				1/1//			
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE							
FILE NOW: FEE IS \$61.25	9. Election Campaign Trust Fund Contribu	· -	\$5.00 May Be Added to Fees	Make Check I Florida Departm	-		
10. OFFICERS AN	ND DIRECTORS 11	• - /	ADDITIONS/CHANGE	S TO OFFICERS AND DIRE	CTORS IN 10)	
TITLE P	Delete	LE P	001 0-			Addition	
NAME WALTON, EDIE MRS.		me ##	RRY INU	/ //(*/1\}			
STREET ADDRESS 29 HARDEE COURT SOUTH	ST ST	REET ADDRESS	00 CUR	HS BLUL		İ	
CITY-ST-ZIP ROCKLEDGE FL 32955		ry-ST-ZIP	oco4. 1	-1 3290	フ	· I	
TITLE VP	Z Delete Til	1.7	2 / / /	+	Change [Addition	
NAME KRUPA, FRANE		ME Le	e Roll	. <u> </u>	— . · · -	Addition	
STREET ADDRESS -1405. HARBOR, DRIVE		REET ADDRESS	O HOYL	AKE COUR	7		
CITY-ST-ZIP MERRITT ISLAND FL 32952		1 771	ekledge	2 Fl 324	55		
TITLE S	Delete TIT	ı. 5	`	, P	Change [Addition	
NAME HARTSELLE, TED J MR.		ME 650	Pain Dh	11.05	onlings		
STREET ADDRESS 980 MIRACLE WAY		REET ADDRESS \$1.5	To West	DE DR			
CITY-ST-ZIP ROCKLEDGE FL 32955	CIT	Y-ST-ZIP	CKIEGE	11 1890	55		
TITLE T	☐ Delete TIT	i.E	9,01	, <u>, , , , , , , , , , , , , , , , , , </u>	Change [Addition	
NAME TURNER, GERALD		ME		_			
STREET ADDRESS 801 WHITE PINE AVE.	ST	REET ADDRESS					
CITY-ST-ZIP ROCKLEDGE FL	CIT	Y-ST-ZIP		•			
TITLE D	☐ Delete TIT	LE			_ Change _	Addition	
NAME MUNCH, HARRY		ME			_ ,	_	
STREET ADDRESS 5300 CURTIS BLVD	ST	REET ADDRESS					
CITY-ST-ZIP COCOA FL 32927	CIT	Y-ST-ZIP					
TITLE D .	☐ Delete TIT	LE			Change	Addition	
NAME STEVENS, HAROLD	NA NA	l l		_	_ , ,		
STREET ADDRESS 936 LEXINGTON RD	STI	REET ADDRESS					
CITY-ST-ZIP ROCKLEDGE FL 32955	CIT	Y-ST-ZIP			•		
12 I hereby certify that the information supplies	d with this filling does not qualify for the ey	omption stated in Se	ction 119 07(3)(i) Flor	rida Statutas. I further cortifi	that the infer	mation	

12. I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

WOND INFORMATION OF THE PARTY O

4-17-63

371-861-8192