

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Jan 31, 2005 8:00 am
Secretary of State

01-31-2005 90058 007 ****61.25

DOCUMENT # 731357

1. Entity Name

KIWANIS CLUB OF CLERMONT, INC.



Principal Place of Business
806 W. MINNEOLA AVE.
CLERMONT FL 34711
US

Mailing Address
P.O. BOX 120114
CLERMONT FL 34712
US

40005049



1st MOORE CR2E037 (10/04)

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-0967554

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

CALDWELL, ROY W. ATTORNEY
THE OAKS, 608 S. MAIN AVE., #28
MINNEOLA FL 34755

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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.

SIGNATURE

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
Due By May 1, 2005

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Florida Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE D ☐ Delete
NAME THOMAS, ELWOOD P
STREET ADDRESS 1800 JOHNSON DRIVE
CITY-ST-ZIP CLERMONT FL 34711

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE TD ☐ Delete
NAME FALLMAN, FRED
STREET ADDRESS 10625 POINT OVERLOOK DR
CITY-ST-ZIP CLERMONT FL 34711-7319

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE P ☒ Delete
NAME BECKER, RON
STREET ADDRESS 806 W. MINNEOLA AV
CITY-ST-ZIP CLERMONT FL 34711

TITLE ☒ Change ☐ Addition
NAME Diane Martinez
STREET ADDRESS 101 E. Highway 50
CITY-ST-ZIP Clermont, FL 34711

TITLE SD ☒ Delete
NAME WIEBUSH, JOSEPH
STREET ADDRESS 1830 RAMIE ROAD
CITY-ST-ZIP CLERMONT FL

TITLE ☒ Change ☐ Addition
NAME John Moore
STREET ADDRESS 1984 Brantley Circle
CITY-ST-ZIP Clermont, FL 34711

TITLE D ☐ Delete
NAME CUMMINGS, HAROLD
STREET ADDRESS 1977 BRANTLEY CIR.
CITY-ST-ZIP CLERMONT FL 34711

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE VD ☐ Delete
NAME WETTERING, FREDERICK L
STREET ADDRESS 11535 NELLIE OAKS BEND
CITY-ST-ZIP CLERMONT FL 34711

TITLE ☒ Change ☐ Addition
NAME Bill Adams
STREET ADDRESS 721 W. Lakeshore Dr.
CITY-ST-ZIP Clermont, FL 34711

12. I hereby certify that the information supplied with this filing 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 another like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

John A. Moore

1/25/05 352 394-4071

Date Daytime Phone #