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

FILED
Feb 16, 2005 8:00 am
Secretary of State
02-16-2005 90057 023 ****61.25

DOCUMENT # 749617

1. Entity Name

KIWANIS CLUB OF BONIFAY, FLORIDA

Principal Place of Business	Mailing Address
P.O. BOX 264 BONIFAY FL 32425	P.O. BOX 264 BONIFAY FL 32425

1st MOORE CR2E037 (10/04)

2. Principal Place of Business	3. Mailing Address
301 J. HARVEY ETHERIDGE ST.	
Suite, Apt. #, etc.	Suite, Apt. #, etc.
BONIFAY, FL	
City & State	City & State
32425 HOLMES	
Zip / Country	Zip / Country

4. FEI Number 59-6153558 ☐ 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
JACOBS, JAMES E. 11 SON-IN-LAW ROAD P.O. BOX 906 (FOR MAIL) BONIFAY FL 32425	Name Holly F. Holland Street Address (P.O. Box Number is Not Acceptable) 2305 IDLEWOOD DRIVE City Bonifay FL Zip Code 32425

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 Holly F Holland HOLLY F HOLLAND DATE
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

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 / NAME / STREET ADDRESS / CITY-ST-ZIP	VP MOORE, JAMES 1235 N. WAUKESHA ST. BONIFAY FL 32425	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Director	☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D LEE, DEHNIS PO BOX 997 BONIFAY FL 32425	☑ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D FOXWORTH, ANITA 203 HATCHEZ DRIVE BONIFAY FL 32425	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	President	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P BROOKS, ROGER PO BOX 132 BONIFAY FL 32425	☑ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D JACOBS, JAMES E P.O. BOX 906 BONIFAY FL 32425	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Treasurer	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VP (VICE PRESIDENT) JEMPSEY OWENS 220 WEDGEWOOD DR BONIFAY, FL 32425	☐ Change ☑ Addition

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 all other like empowered.

SIGNATURE: Holly F Holland HOLLY F HOLLAND
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #