

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000001449

FILED  
Apr 28, 2007  
Secretary of State

Entity Name: KIWANIS CLUB OF ENGLEWOOD-CAPE HAZE INCORPORATED

**Current Principal Place of Business:**

P.O.BOX 982  
ENGLEWOOD, FL 34925

**New Principal Place of Business:**

2881 WORTH AVE  
ENGLEWOOD, FL 34224

**Current Mailing Address:**

P.O.BOX 982  
ENGLEWOOD, FL 34925

**New Mailing Address:**

FEI Number: 57-1224325      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

GAVALAS, GEORGE L  
13647 FORESMAN BLVD  
PORT CHARLOTTE, FL 33981      US

**Name and Address of New Registered Agent:**

SANDNESS, MARGERY M  
2881 WORTH AVE  
ENGLEWOOD, FL 34224      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: MARGERY M. SANDNESS      04/28/2007  
\_\_\_\_\_  
Electronic Signature of Registered Agent      Date

**OFFICERS AND DIRECTORS:**

Title: P      ( ) Delete  
Name: GAVALAS, GEORGE L  
Address: 13647 FORESMAN BLVD  
City-St-Zip: PORT CHARLOTTE, FL 33980

Title: P      ( ) Delete  
Name: ERNEST, TODD  
Address: 7186 DARLINGTON ST  
City-St-Zip: ENGLEWOOD, FL 34223

Title: T      ( ) Delete  
Name: SWANSON, PATTY  
Address: 341 BUCKNELL RD  
City-St-Zip: VENICE, FL 34293

Title: S      (X) Delete  
Name: ALEXANDER, CAROL  
Address: 1 CADDY RD  
City-St-Zip: ROTONDA W, FL 33947

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: P      (X) Change ( ) Addition  
Name: STEPHENS, NORMA  
Address: 10091 STONECROP AVE.  
City-St-Zip: ENGLEWOOD, FL 34224

Title: T      (X) Change ( ) Addition  
Name: KNIGHT, ARLENE  
Address: 351 OAK ST  
City-St-Zip: ENGLEWOOD, FL 34223

Title: S      (X) Change ( ) Addition  
Name: SANDNESS, MARGERY  
Address: 2881 WORTH AVE  
City-St-Zip: ENGLEWOOD, FL 34224

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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: MARGERY M. SANDNESS      SEC      04/28/2007  
\_\_\_\_\_  
Electronic Signature of Signing Officer or Director      Date