2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N35302

FILED Jan 05, 2009 Secretary of State

Entity Name: KIWANIS CLUB OF FRIENDSHIP OF OCALA, INC.

Current Principal Place of Business: New Principal Place of Business: 8375 SW HWY 200 COMMUNITY RM, 2ND FL OCALA, FL 34481 **New Mailing Address: Current Mailing Address:** CHARLES MARTINAGE 5903 SW 57TH PL OCALA, FL 34474 US FEI Number: 59-3078265 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: MARTINAGE, CHARLES5 5903 SW 57TH PLACE OCALA, FL 34474 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: Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Change () Addition () Delete ROULE, BARBARA Name: Name: 8019 SOUTHWEST 116TH LOOP Address: Address: City-St-Zip: OCALA, FL 34481 City-St-Zip: Title: Title: (X) Change () Addition () Delete MARTINAZE, CHARLES Name: MARTINAGE, CHARLES Name: Address: 5903 SW 57TH PL Address: 5903 SW 57TH PL City-St-Zip: OCALA, FL 34474 City-St-Zip: OCALA, FL 34474 Title: () Delete Title: () Change () Addition HOFSTATTER, FRANK Name: Name: 8059 SW 115TH LOOP Address: Address: City-St-Zip: OCALA, FL 34481 City-St-Zip: (X) Change () Addition Title: () Delete Title: PATTERSON, ROGER Name: Name: CLEMENTS, A. J. 8573 SOUTHWEST 62ND COURT 9392-C SW 97TH PLACE Address: Address: City-St-Zip: OCALA, FL 34476 City-St-Zip: OCALA, FL 34481 Title: () Delete Title: (X) Change () Addition KEYSER, ROBERT KEYSER, ROBERT Name: Name: 5101 SW 60TH ST RD 9155-C SW 83RD COURT Address: Address: City-St-Zip: OCALA, FL 34476 City-St-Zip: OCALA, FL 34481 Title: () Delete Title: () Change (X) Addition PETERSEN, KARL Name: Name: Address: Address: 6201 SW 84TH PLACE OCALA, FL 34476 City-St-Zip: 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: CHARLES MARTINAGE T 01/05/2009