


2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 05, 2004 8:00 am
Secretary of State

04-05-2004 90054 004 ****61.25

DOCUMENT # N36040
 1. Entity Name
KIWANIS CLUB OF PALMETTO, INC.



Principal Place of Business
 P O BOX 62
 PALMETTO, FL 34222

Mailing Address
 P O BOX 62
 PALMETTO, FL 34220 US

2. Principal Place of Business
 Suite, Apt. #, etc.
 City & State
 Zip Country

3. Mailing Address
 Suite, Apt. #, etc.
 City & State
 Zip Country

01292004 Chg-NP CR2E037 (10/03)

4. FEI Number
59-0559505 Applied For
 Not Applicable

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

GEISLER, KEVIN W
6007 60TH STREET E
PALMETTO, FL 34221

7. Name and Address of New Registered Agent

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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

Filing Fee is \$61.25 Due by May 1, 2004

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

TITLE	PD	<input type="checkbox"/> Delete
NAME	STEPHENS, JOHN	
STREET ADDRESS	3424 US HWY 301	
CITY-ST-ZIP	ELLENTON, FL 34222	
TITLE	S	<input type="checkbox"/> Delete
NAME	RUSCOE, PETER	
STREET ADDRESS	7807 1ST AVE W	
CITY-ST-ZIP	BRADENTON, FL 34209	
TITLE	T	<input type="checkbox"/> Delete
NAME	GEISLER, KEVIN W	
STREET ADDRESS	6007 60TH ST E	
CITY-ST-ZIP	BRADENTON, FL 34211	
TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	GROOVER, RICK L	
STREET ADDRESS	811 44TH AVE E	
CITY-ST-ZIP	ELLENTON, FL 34222	
TITLE	PD	<input type="checkbox"/> Delete
NAME	BROWN, BRIAN	
STREET ADDRESS	4705 9TH ST E	
CITY-ST-ZIP	ELLENTON, FL 34222	
TITLE	D	<input type="checkbox"/> Delete
NAME	JOHNSON, ELAINE K	
STREET ADDRESS	4912 BAY STATE ROAD	
CITY-ST-ZIP	PALMETTO, FL 34221	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	John Watters	
STREET ADDRESS	5203 Woodlawn Circle	
CITY-ST-ZIP	Palmetto, FL 34221	
TITLE	D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

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: Kevin W. Geisler **4/2/04** **941-752-6262**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #