

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N48707

FILED
Mar 22, 2007
Secretary of State

Entity Name: KIWANIS CLUB OF NORTH ORLANDO, INC.

Current Principal Place of Business:

800 E. WASHINGTON STREET
ORLANDO, FL 32801 US

New Principal Place of Business:

600 E. WASHINGTON STREET
ORLANDO, FL 32801 US

Current Mailing Address:

PO BOX 641
ORLANDO, FL 32802

New Mailing Address:

FEI Number: 59-6158827

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SEKAC, MARY F
757 LITTLE WEKIVA CIRCLE
ALTAMONTE SPRINGS, FL 32714 US

Name and Address of New Registered Agent:

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:

Title: PD () Delete
Name: LUEBBERT, RICKY
Address: 6014 SCOTS PINE CT
City-St-Zip: ORLANDO, FL 32819

Title: PED () Delete
Name: BARR, JR, PETE
Address: 600 E WASHINGTON ST
City-St-Zip: ORLANDO, FL 32801

Title: TD () Delete
Name: DAVIS, KAY
Address: 3058 GREENMOUNT RD
City-St-Zip: ORLANDO, FL 32806

Title: SD () Delete
Name: SEKAC, MARY
Address: 757 LITTLE WEKIVA CIR
City-St-Zip: ALTAMONTE SPRINGS, FL 32714

Title: VPD () Delete
Name: RIGBY, BARRY
Address: 5205 S ORANGE AVE
City-St-Zip: ORLANDO, FL 32809

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: LUEBBERT, RICKY
Address: 6014 SCOTS PINE CT
City-St-Zip: ORLANDO, FL 32819

Title: PD (X) Change () Addition
Name: BARR, JR, PETE
Address: 600 E WASHINGTON ST
City-St-Zip: ORLANDO, FL 32801

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

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

Title: PED (X) Change () Addition
Name: RIGBY, BARRY
Address: 5205 S ORANGE AVE
City-St-Zip: ORLANDO, FL 32809

I hereby certify that the information supplied with this filing does not qualify for the 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: MARY F SEKAC

SEC

03/22/2007

Electronic Signature of Signing Officer or Director

Date