

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N49772

FILED
Apr 10, 2008
Secretary of State

Entity Name: FORT MYERS KIWANIS CLUB, INCORPORATED

Current Principal Place of Business:

THE KIWANIS HOUSE
1630 WOODFORD AVE.
FT. MYERS, FL 33901 US

New Principal Place of Business:

Current Mailing Address:

POST OFFICE BOX 1498
FORT MYERS, FL 33902

New Mailing Address:

FEI Number: 59-6134241

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MCNEILL, MICHELE S
6490 MAYTREE CIRCLE
FORT MYERS, FL 33905 US

Name and Address of New Registered Agent:

LANGGUTH, GEORGE
5545 BENCHMARK LANE
SANFORD, FL 32773 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: GEORGE LANGGUTH

04/10/2008

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: SHARMA, DINESH
Address: PO BOX 1498
City-St-Zip: FORT MYERS, FL 33902

Title: T () Delete
Name: MCNEILL, MICHELE
Address: PO BOX 1498
City-St-Zip: FORT MYERS, FL 33902

Title: S () Delete
Name: SEGEL, BARBARA L
Address: PO BOX 1498
City-St-Zip: FORT MYERS, FL 33902

Title: VP () Delete
Name: HARKNESS, JOSHUA
Address: PO BOX 1498
City-St-Zip: FORT MYERS, FL 33902

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VP (X) Change () Addition
Name: WINESETT, ROBERT
Address: PO BOX 1498
City-St-Zip: FORT MYERS, FL 33902

Title: S (X) Change () Addition
Name: MCNEILL, MICHELE
Address: PO BOX 1498
City-St-Zip: FORT MYERS, FL 33902

Title: T (X) Change () Addition
Name: BURT, DAVID
Address: PO BOX 1498
City-St-Zip: FORT MYERS, FL 33902

Title: P (X) Change () Addition
Name: HARKNESS, JOSHUA
Address: PO BOX 1498
City-St-Zip: FORT MYERS, FL 33902

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: MICHELE S. MCNEILL

S

04/10/2008

Electronic Signature of Signing Officer or Director

Date