

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000000454

FILED
Jan 20, 2010
Secretary of State

Entity Name: KIWANIS CLUB OF EAU GALLIE - SUNTREE, INC.

Current Principal Place of Business:

4534 RIVERMIST DRIVE
MELBOURNE, FL 32935 US

New Principal Place of Business:

Current Mailing Address:

4534 RIVERMIST DRIVE
MELBOURNE, FL 32935 US

New Mailing Address:

FEI Number: 59-3425219

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CHAMPAGNE, HENRY A
4534 RIVERMIST DRIVE
MELBOURNE, FL 32935 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: PRES
Name: JONES, RUPERT L PRES.
Address: 2495 RICKY RD
City-St-Zip: MELBOURNE, FL 32935 US

Title: VP
Name: METTALA, IIONA V.PRES.
Address: APT.401,1595 ,U.S. HWY. A1A
City-St-Zip: SATELLITE BEACH, FL 32937 US

Title: TRES
Name: BLAKEWAY, JILL TRESURE
Address: 112 MARS CT.
City-St-Zip: INDIALANTIC, FL 32903 US

Title: SECR
Name: CHAMPAGNE, HENRY A SEC.
Address: 4534 RIVERMIST DRIVE
City-St-Zip: MELBOURNE, FL 32935 US

Title: BOD
Name: CHAPMAN-FLANNAGAN, MAE BOD
Address: 401 TORTOISE VIEW CIR
City-St-Zip: SATTELLITE BEACH, FL 32937 US

Title: P.P.
Name: MCCOY, JANE P.PRES.
Address: 2709 ALICIA LN.
City-St-Zip: MELBOURNE, FL 32935 US

I hereby 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 all other like empowered.

SIGNATURE: HENRY A. CHAMPAGNE

SECR

01/20/2010

Electronic Signature of Signing Officer or Director

Date