

2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 701962

Entity Name: THE KIWANIS CLUB OF VENICE INC**Current Principal Place of Business:**418 GULF STREET
VENICE, FL 34285**Current Mailing Address:**418 GULF STREET
VENICE, FL 34285 US**FEI Number:** 59-6152218**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**TRAMMELL, THOMAS B
418 GULF STREET
VENICE, FL 34285 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:**

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title TREASURER
Name TRAMMELL, THOMAS B
Address 418 GULF ST.
City-State-Zip: VENICE FL 34285

Title SECRETARY
Name MILLER, BEVERLY
Address 1217 GAYLE AVE
City-State-Zip: NOKOMIS FL 34275

Title DIR, DIRECTOR
Name BLOOM, NATALIE
Address 3533 N. VILLAGE CT.
City-State-Zip: SARASOTA FL 34231

Title VP
Name MAISON, JOAN
Address 1386 STILLWATER DR.
City-State-Zip: VENICE FL

Title DIRECTOR
Name MOWERY, FRANK
Address 233 SOUTH TAMIAMI TRAIL
City-State-Zip: VENICE FL 34285

Title PRESIDENT
Name MOORE, JAN
Address 409 KUNZE RD.
City-State-Zip: VENICE FL 34292

Title DIRECTOR
Name MOORE, ROBERT
Address 409 KUNZE RD.
City-State-Zip: VENICE FL 34275

Title DIRECTOR
Name KATHLEEN MALLOY
Address 225 MORNINGSIDE ROAD
City-State-Zip: VENICE FL 34293

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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: THOMAS TRAMMELL**TREASURER****01/15/2020**

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name FRANCK, ERNIE
Address 1211 CAPRI ISLE BLVD.
 APT. 72
City-State-Zip: VENICE FL 34292

Title DIRECTOR
Name WALKER, SCOTT
Address 262 MIAMI AVE WEST
City-State-Zip: VENICE FL 34285