2019 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

FILED Mar 05, 2019

Secretary of State

7633147180CC

Officer/Director Detail:

Title TREASURER Title DIRECTOR

Name TRAMMELL, THOMAS B Name MOWERY, FRANK

Address 418 GULF ST. Address 233 SOUTH TAMIAMI TRAIL

City-State-Zip: VENICE FL 34285 City-State-Zip: VENICE FL 34285

Title **PRESIDENT** Title **SECRETARY** MILLER, BEVERLY Name MOORE, JAN Name Address 409 KUNZE RD. Address 1217 GAYLE AVE VENICE FL 34292 City-State-Zip: City-State-Zip: NOKOMIS FL 34275

Title DIR, DIRECTOR Title DIRECTOR

NameBLOOM, NATALIENameMOORE, ROBERTAddress3533 N. VILLAGE CT.Address409 KUNZE RD.

City-State-Zip: SARASOTA FL 34231 City-State-Zip: VENICE FL 34275

Title VP Title DIRECTOR

Name MAISON, JOAN Name KATHLEEN MALLOY

Address 1386 STILLWATER DR. Address 225 MORNINGSIDE ROAD

City-State-Zip: VENICE FL 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 03/05/2019

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued:

Title DIRECTOR Title DIRECTOR

Name FALING, TOM Name WALKER, SCOTT

Address 856 BRENDTWOOD DRIVE Address 262 MIAMI AVE WEST

City-State-Zip: VENICE FL 34292 City-State-Zip: VENICE FL 34285