

2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 702889

Entity Name: KIWANIS CLUB OF CAPITAL CITY, TALLAHASSEE, INC.**Current Principal Place of Business:**2878 MAHAN DR.
TALLAHASSEE, FL 32308**Current Mailing Address:**2878 MAHAN DR.
TALLAHASSEE, FL 32308**FEI Number: 59-6168949****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**SANDERS, JOE
2878 MAHAN DR.
TALLAHASSEE, FL 32308 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 PAST PRESIDENT
Name PRICE, BENJAMIN E
Address 4611 INISHEER DR
City-State-Zip: TALLAHASSEE FL 32309

Title PRESIDENT
Name TYNAN, AMBER
Address 3100 LAYLA ST
City-State-Zip: TALLAHASSEE FL 32303

Title TREA
Name SANDERS, JOE
Address 2878 MAHAN DR.
City-State-Zip: TALLAHASSEE FL 32308

Title PRESIDENT ELECT
Name DAVIS, JAMES
Address 3528 CARRINGTON DR
City-State-Zip: TALLAHASSEE FL 32303

Title DIRECTOR
Name DAVIS, DWIGHT
Address 2747 EVERETT LN
City-State-Zip: TALLAHASSEE FL 32308

Title SECRETARY
Name LEDBETTER, ROSE
Address 4162 LAUREL OAK CIR
City-State-Zip: TALLAHASSEE FL 32311

Title DIRECTOR
Name OHLSEN, JENNIFER
Address 146 TEAL LN.
City-State-Zip: TALLAHASSEE FL 32308

Title DIRECTOR
Name MORGAN, THOMAS
Address 2996 FENWICK CT.
City-State-Zip: TALLAHASSEE FL 32309

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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: JOE SANDERS**TREASURER****02/28/2016**

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name SMITH, LINDA J
Address 1842 VINEYARD WAY
City-State-Zip: TALLAHASSEE FL 32317

Title DIRECTOR
Name DRIGGERS, DUSTIN
Address 3072 WHIRL A WAY TRL
City-State-Zip: TALLAHASSEE FL 32309

Title DIRECTOR
Name ATKINSON, TIM
Address 700 DUPARC CIR
City-State-Zip: TALLAHASSEE FL 32312

Title DIRECTOR
Name LEDBETTER, JIM
Address 4162 LAUREL OAK CIR
City-State-Zip: TALLAHASSEE FL 32311