

2022 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 TREA
Name SANDERS, JOE
Address 2878 MAHAN DR.
City-State-Zip: TALLAHASSEE FL 32308

Title DIRECTOR
Name DUGGAR, TOMMY
Address 2878 MAHAN DR.
City-State-Zip: TALLAHASSEE FL 32308

Title PAST PRESIDENT
Name JOHNSON, DAVID
Address 1421 LOLA DR.
City-State-Zip: TALLAHASSEE FL 32301

Title PRESIDENT ELECT
Name KENYON, JOHN
Address 3081 BAYSHORE DR.
City-State-Zip: TALLAHASSEE FL 32309

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

Title PRESIDENT
Name KERCE, SAM
Address 2005 LESS AVE.
City-State-Zip: TALLAHASSEE FL 32308

Title DIRECTOR, PASTOR
Name NEIRA, ALICE
Address 2005 LEE AVE
City-State-Zip: TALLAHASSEE FL 32308

Title SECRETARY
Name LEDBETTER, JAMES
Address 4177-B BREWSTER RD.
City-State-Zip: TALLAHASSEE FL 32308

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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****02/12/2022**

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name PARDUE, HOWARD
Address 809 MADERIA CIRCLE
City-State-Zip: TALLAHASSEE FL 32312

Title DIRECTOR
Name STEVENSON, JUNE
Address 3810 BUCK LAKE RD.
1102
City-State-Zip: TALLAHASSEE FL 32317

Title DIRECTOR
Name NEIRA, ALICE
Address 2005 LEE AVE.
City-State-Zip: TALLAHASSEE FL 32308