

2020 FLORIDA NOT FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# 713465

Entity Name: KIWANIS CLUB OF GREATER WEST PASCO, INC.

Current Principal Place of Business:

12014 PENZANCE LANE
NEW PORT RICHEY, FL 34654

Current Mailing Address:

P.O. BOX 1716
NEW PORT RICHEY, FL 34656

FEI Number: 59-6214634

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

KING, JANE
12014 PENZANCE LANE
NEW PORT RICHEY, FL 34654 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 DIRECTOR, TREASURER
Name BURKE, ANGELA
Address 7127 SANDYWOOD CT
City-State-Zip: NEW PORT RICHEY FL 34654

Title DIRECTOR
Name INTERDONATI, EDWARD
Address 8829 MANOS CIRCLE
City-State-Zip: NEW PORT RICHEY FL 34655-3007

Title DIRECTOR
Name KING, JANE
Address 12014 PENZANCE LANE
City-State-Zip: NEW PORT RICHEY FL 34654

Title DIRECTOR, SECRETARY
Name BURGHARDT, LYNNE
Address 844 PARADISE BLVD.
City-State-Zip: TARPON SPRINGS FL 34689

Title DIRECTOR
Name MORRIS, ROBERT
Address 4412 HARNEY CT
City-State-Zip: NEW PORT RICHEY FL 34655

Title DIRECTOR, PRESIDENT
Name BURKE, THOMAS A
Address 7127 SANDYWOOD CT
City-State-Zip: NEW PORE RICHEY FL 34654

Title DIRECTOR, VP
Name WOOD, JOHN
Address 8914 BEL-MEADOW WAY
City-State-Zip: TRINITY FL 34655

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: ANGELA BURKE

TREASURER

11/10/2020

Electronic Signature of Signing Officer/Director Detail

Date