

2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 715213

Entity Name: KIWANIS CLUB OF ORLANDO CHARITIES, INC.**Current Principal Place of Business:**626 LAKE DOT CIRCLE
ORLANDO, FL 32801**Current Mailing Address:**626 LAKE DOT CIRCLE
ORLANDO, FL 32801**FEI Number:** 59-1628446**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**JOHNSON, STEVEN L
626 LAKE DOT CIRCLE
ORLANDO, FL 32801 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:** STEVEN L. JOHNSON

03/08/2016

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title D
Name MCCORMAC, WILLIAM
Address 626 LAKE DOT CIRCLE
City-State-Zip: ORLANDO FL 32801

Title PD
Name BRESNICK, RUTH
Address 626 LAKE DOT CIRCLE
City-State-Zip: ORLANDO FL 32801

Title TD
Name PORTER, THOMAS J
Address 626 LAKE DOT CIRCLE
City-State-Zip: ORLANDO FL 32801

Title SD
Name BATES, BOB
Address 626 LAKE DOT CIRCLE
City-State-Zip: ORLANDO FL 32801

Title VPD
Name RAUSCH, STEVE
Address 626 LAKE DOT CIRCLE
City-State-Zip: ORLANDO FL 32801

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 J PORTER

TREASURER/DIRECTOR

03/08/2016

Electronic Signature of Signing Officer/Director Detail

Date