

**2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 746330

**Entity Name:** KIWANIS CLUB OF HOMOSASSA SPRINGS, INC.

**Current Principal Place of Business:**

10 ENCLAVE PT S  
HOMOSASSA, FL 34446

**Current Mailing Address:**

P O BOX 1310  
HOMOSASSA SPRINGS, FL 34447 US

**FEI Number: 59-1874972**

**Certificate of Status Desired: No**

**Name and Address of Current Registered Agent:**

WINERNHEIMER, MELANIE  
5545 BENCHMARK LN.  
SANFORD, FL 32773 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: MELANIE WINERNHEIMER**

**02/23/2015**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title P  
Name WILLIAMS, MARGARET  
Address 5730 W PINE CIR  
City-State-Zip: CRYSTAL RIVER FL 34429

Title PE  
Name REYNOLDS, NANCY  
Address P.O. BOX 97  
City-State-Zip: HOMOSASSA FL 34447

Title D  
Name GRAHAM, JACK  
Address 10 BLUE BEECH CT  
City-State-Zip: HOMOSASSA FL 34446

Title S/D  
Name WHITAKER, MARK  
Address 18 BYRSONIMA CT  
City-State-Zip: HOMOSASSA FL 34446

Title T  
Name HARRIS, JAMES  
Address 10 ENCLAVE PT S  
City-State-Zip: HOMOSASSA FL 34446

*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: JAMES F HARRIS JR**

**TREASURER**

**02/23/2015**

Electronic Signature of Signing Officer/Director Detail

Date