DOCUMENT Entity Name	# N01156 : THE KIWANIS CLUB OF SOUTHEAST VOLUSIA COUNTY, IN	Jan 17, 2014 NC. Secretary of Stat CC4104983473
C/O 24 FAIRWA	ncipal Place of Business: AY CIRCLE BEACH, FL 32168	004104000410
Current Mail	ling Address:	
P.O. BOX 90 NEW SMYR	5 NA BEACH, FL 32170 US	
FEI Number:	: 59-2530302 Ce	rtificate of Status Desired: No
Name and A	ddress of Current Registered Agent:	
CAULFIELD, AN 182 HIBISCUS EDGEWATER, I		
The above named	l entity submits this statement for the purpose of changing its registered office or registered	agent, or both, in the State of Florida.
SIGNATURE	:	
	Flootnamic Circature of Desistanted Assert	Date

2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

Title SD Title TD CAULFIELD, ANNA SEC Name Name LINDZON, TOM TREAS 182 HIBISCUS ROAD Address Address 24 FAIRWAY CIRCLE City-State-Zip: NEW SMYRNA BEACH FL 32168 City-State-Zip: EDGEWATER FL 32141 VP Title VP Title Name HARRELL, ALEX VP Name HODSON, DOUGLAS Address P.O. BOX 905 Address 317 S DIXIE City-State-Zip: NEW SMYRNA BEACH FL 32168 NEW SMYRNA BEACH FL 32170 City-State-Zip:

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: TOM LINDZON

TREASURER

01/17/2014

Date

Electronic Signature of Signing Officer/Director Detail

FILED Jan 17, 2014

## retary of State 24104983473

Electronic Signature of Registered Agent

## **Officer/Director Detail :**

Date