

2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N17000003533

Entity Name: FOUNDATION OF KIWANIS CLUB OF GREATER ORLANDO-WINTER PARK, INC.**Current Principal Place of Business:**400 NORTH NEW YORK AVENUE, STE 106
WINTER PARK, FL**Current Mailing Address:**PO BOX 2337
WINTER PARK, FL 32790**FEI Number: 82-1285784****Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CASEY, SHAWN
621 WILKS AVE.
ORLANDO, FL 32809 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:** SHAWN CASEY**03/25/2024**

Electronic Signature of Registered Agent

Date

Officer/Director Detail :**Title** D, TREASURER**Name** CASEY, SHAWN**Address** 400 NORTH NEW YORK AVENUE, STE
106**City-State-Zip:** WINTER PARK FL**Title** D, SECRETARY**Name** MARINO, CATHY**Address** 400 NORTH NEW YORK AVENUE, STE
106**City-State-Zip:** WINTER PARK FL**Title** D**Name** SMITH, TODD**Address** 400 NORTH NEW YORK AVENUE, STE
106**City-State-Zip:** WINTER PARK FL**Title** DIRECTOR**Name** MACGEORGE, STEVE**Address** 400 NORTH NEW YORK AVENUE, STE
106**City-State-Zip:** WINTER PARK FL**Title** DIRECTOR, PRESIDENT**Name** SANDERS, SAMANTHA**Address** 400 NORTH NEW YORK AVENUE, STE
106**City-State-Zip:** WINTER PARK FL 32789

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: CATHY S MARINO**SECRETARY****03/25/2024**

Electronic Signature of Signing Officer/Director Detail

Date