

2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N42756

Entity Name: KIWANIS CLUB OF PELICAN BAY, NAPLES, INC.**Current Principal Place of Business:**2065 PAINTED PALM DR
NAPLES, FL 34119**Current Mailing Address:**2065 PAINTED PALM DR
NAPLES, FL 34119**FEI Number: 65-0276336****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**ROGERS, SANDRA L
2065 PAINTED PALM DR
NAPLES, FL 34119 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
Name	MACERA, JESSICA
Address	4099 TAMIAMI TRAIL N SUITE 200
City-State-Zip:	NAPLES FL 34103

Title	T
Name	PHILBIN, PATRICK
Address	4637 SNOWY EGRET DRIVE
City-State-Zip:	NAPLES FL 34119

Title	PRESIDENT
Name	KOVER, DAVID
Address	5636 HAMMOCK ISLE DR
City-State-Zip:	NAPLES FL 34119

Title	DIRECTOR
Name	ROGERS, SANDRA L
Address	2065 PAINTED PALM DR
City-State-Zip:	NAPLES FL 34119

Title	D
Name	CAMPBELL, JOHN
Address	9535 CHELFORD CT
City-State-Zip:	NAPLES FL 34109

Title	SECRETARY
Name	GROSKREUTZ, LARRY
Address	4085 TAMIAMI TR N B103
City-State-Zip:	NAPLES FL 34103

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: SANDRA ROGERS**REGISTERED AGENT****03/20/2014**_____
Electronic Signature of Signing Officer/Director Detail_____
Date