


**2008 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 23, 2008 8:00 am
Secretary of State

04-23-2008 90021 013 ****61.25

DOCUMENT # 700220	
1. Entity Name THE KIWANIS CLUB OF DUNEDIN, INC	

Principal Place of Business P O BOX 41 P.O. BOX 41 DUNEDIN, FL 34697 US	Mailing Address P O BOX 41 P.O. BOX 41 DUNEDIN, FL 34697 US
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DO NOT WRITE IN THIS SPACE



04112008 No Chg-NP CR2E037 (4/06)

4. FEI Number 59-6168905	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent

DEANE, SHEILA
2226 SNEAD AVENUE
DUNEDIN, FL 34698

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8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

**Filing Fee is \$61.25
Due by May 1, 2008**

9. Election Campaign Financing Trust Fund Contribution. **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PED GATTAS, CHRISTOPHER 2631 DINEWOOD DRIVE DUNEDIN, FL 34698
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD BEATY, KIM 570 WALDEN COURT DUNEDIN, FL 34698
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD DEANE, SHELIA 2226 SNEAD AVENUE DUNEDIN, FL 34698
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD NANDRAM, ROBERT 3147 FIESTA DRIVE DUNEDIN, FL 34698
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ASTD GLEASON, LAURANCE A 2412 SUMMERWOOD COURT DUNEDIN, FL 34698
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D COLLMAN, RODNEY 215 HANCOCK STREET DUNEDIN, FL 34698

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Christopher M Gattas 4/17/08 727 733-5886

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #