2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 701684

FILED Jul 16, 2004 Secretary of State

Entity Name: KIWANIS CLUB OF SOUTH ORLANDO, INCORPORATED

Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
	WAY GARDEI 9, FL 32806	NS RD US			
Current Mailing Address:			New Mailing Addres	New Mailing Address:	
	WAY GARDEI 9, FL 32806	NS RD US			
FEI Number:	59-6153283	FEI Number Applied For()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and	Address of C	Current Registered Agent:	Name and Address	of New Registered Agent:	
	AMES P WAY GARDEI 9, FL 32806	NS ROAD US			
	named entity : of Florida.	submits this statement for the pu	rpose of changing its register	ed office or registered agent, or both,	
SIGNATUR	RE:				
	Electror	nic Signature of Registered Ager	t	Date	
OFFICERS AND DIRECTORS:		ADDITIONS/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	GULLION, MIC	GARDENS ROAD	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	S () BARBER, RAYI 4202 A LK UND ORLANDO, FL	ER HILL RD	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	PD () GALVIN, JAME 2804 TRENTON ORLANDO, FL	N LN	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D () JOHNSON, TOI 3781 HALF MO ORLANDO, FL	ON DRIVE	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title:	T () TILLMAN, DAVI) Delete	Title: Name:	() Change () Addition	

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: JAMES P GALVIN PD 07/16/2004