

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 702716

FILED
Jan 10, 2009
Secretary of State

Entity Name: KIWANIS CLUB OF LAKE WALES

Current Principal Place of Business:

P.O. BOX 1037
LAKE WALES, FL 33859

New Principal Place of Business:

101 E. PARK AVE.
LAKE WALES, FL 33859

Current Mailing Address:

P.O. BOX 1037
LAKE WALES, FL 33859

New Mailing Address:

FEI Number: 59-6208465 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SPENCE, DEANNA
957 OLD GABS RD.
LAKE WALES, FL 33898 US

Name and Address of New Registered Agent:

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

OFFICERS AND DIRECTORS:

Title: S () Delete
Name: SPENCE, DEANNA C
Address: 2909 PLANTATION ROAD
City-St-Zip: WINTER HAVEN, FL 33884

Title: TD () Delete
Name: TONJES, LARRY L
Address: 3648 TWISTED OAK CT
City-St-Zip: LAKE WALES, FL 33853

Title: PP () Delete
Name: MCCENDON, JAY
Address: 2254 FOX RUN LANE
City-St-Zip: LAKE WALES, FL 33898

Title: P () Delete
Name: PUPUIS, WOODY
Address: 2578 SCANZ HWYS
City-St-Zip: LAKE WALES, FL 33898

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: PP (X) Change () Addition
Name: DUPUIS, WOODY
Address: 2578 SCENIC HWY S.
City-St-Zip: LAKE WALES, FL 33898

Title: P (X) Change () Addition
Name: MCKEON, THOMAS
Address: 1021 SUNSET DR.
City-St-Zip: LAKE WALES, FL 33853

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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: LARRY TONJES

TD

01/10/2009

Electronic Signature of Signing Officer or Director

_____ Date