

**2006 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 27, 2006 08:00 AM
Secretary of State

DOCUMENT # 705170

1. Entity Name
KIWANIS CLUB OF MIDTOWN TAMPA, INC.



Principal Place of Business

P.O. BOX 532
TAMPA, FL 33601

Mailing Address

P.O. BOX 532
TAMPA, FL 33601



04252006 No Chg-NP

CR2E037 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number

59-0980083

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

PETERSON, RONALD J.
4622 WESTFORD CR
TAMPA, FL 33624

**DO NOT WRITE
IN THIS SPACE**

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 _____

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE _____

**Filing Fee is \$61.25
Due by May 1, 2006**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	T
NAME	RUTH, ANGELA
STREET ADDRESS	10706 N ROME AVENUE
CITY - ST - ZIP	TAMPA, FL 33612
TITLE	D
NAME	CARRAWAY, J. FRAZIER
STREET ADDRESS	48 ALBEMARLE
CITY - ST - ZIP	TAMPA, FL
TITLE	P
NAME	FARRIS, DONALD
STREET ADDRESS	5507 LEGACY CRESCENT PL #201
CITY - ST - ZIP	RIVERVIEW, FL 335692819
TITLE	SD
NAME	PETERSON, RONALD J.
STREET ADDRESS	4622 WESTFORD CIRCLE
CITY - ST - ZIP	TAMPA, FL
TITLE	D
NAME	COLLIER, KENNETH
STREET ADDRESS	4113 SAN JUAN
CITY - ST - ZIP	TAMPA, FL
TITLE	V
NAME	LOVELL, TROY
STREET ADDRESS	100 N TAMPA STREET SUITE 2700
CITY - ST - ZIP	TAMPA, FL 33602

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05/09/06-80044-023 61.25

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IN THIS SPACE**

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: _____

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

RONALD J. PETERSON

Date

Daytime Phone #

4/27/06 813-344-4300