2005 NOT-FOR-PROFIT CORPORATION **ANNUAL REPORT (AR)**

Jan 25, 2005 8:00 am **Secretary of State DOCUMENT # 707512** 1. Entity Name 01-25-2005 90038 003 ****61.25 KIWANIS CLUB OF FORT MYERS-EDISON. INC. Principal Place of Business Mailing Address 1634 WOODFORD STREET FORT MYERS FL 33901 P.O. DRAWER 2736 % G.G. SMART 76960005 FORT MYERS FL 33902 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 1st MOORE CR2E037 (10/04) Applied For City & State City & State 4. FEI Number 59-6168910 Not Applicable Zip Country Zio Country \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent SMART, GERALD G Street Address (P.O. Box Number is Not Acceptable) 18520 TELEGRAPH CREEK LANE FT MYERS, FL **ALVA FL 33920** Zip Code 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) FILE NOW: FEE IS \$61.25 9. Election Campaign Financing Make Check Payable to \$5.00 May Be Due By May 1, 2005 Trust Fund Contribution. Added to Fees Florida Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 10. 11 TITLE ☐ Delete TITLE ☐ Addition WOOLSTON, KATHLEEN NAME NAME PO BOX 50338 STREET ADDRESS STREET ADDRESS FT MYERS FL 33994 CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete Change ☐ Addition SMART, GERALD G NAME NAME 18520 TELEGRAPH CREEK LANE STREET ADDRESS STREET ADDRESS ALVA FL 33920 CITY-ST-ZIP CITY-ST-ZIP TITLE Delete . TITLE ☐ Change ☐ Addition SEGEL, HARRIS NAME NAME STREET ADDRESS 2049 MARAVILLA CIR STREET ADDRESS FT MYERS FL 33901 CITY-ST-ZIP CITY-ST-ZIE TITLE ☐ Delete TITLE ☐ Change ☐ Addition SCHWARTZEL, C A NAMÉ P.O. BOX 6142 STREET ADDRESS STREET ADDRESS FT MYERS FL 33906 CITY-ST-ZIP CITY-ST-7IP PARSILANT TITLE ☐ Delete TITLE Change Addition WILLIAMS, WENDELL NAME NAME 5733 SHOREHAVEN DR. STREET ADDRESS STREET ADDRESS NORTH FORT MYERS FL 33903 CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition TITLE ☐ Delete THILE HAAB, AL NAME NAME **427 CROSS STREET** STREET ADDRESS STREET ADDRESS

I hereby certify that the information supplied with this filing does not qualify 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 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.

CITY-ST-ZIP

SIGNATURE: _

CITY - ST - ZIP

NORTH FORT MYERS FL 33903

Gerald G. Smart

FILED