

**2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Jan 18, 2007 8:00 am**  
**Secretary of State**

01-18-2007 90088 016 \*\*\*\*61.25

**DOCUMENT # 708843**  
 1. Entity Name  
**KIWANIS CLUB OF CAPE CORAL, FLORIDA, INC.**



30006710



Principal Place of Business  
 708 SE 47 TERR  
 CAPE CORAL, FL 33904 US

Mailing Address  
 PO BOX 6  
 CAPE CORAL, FL 33910 US

2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip Country

01082007 Chg-NP CR2E037 (12/06)

4. FEI Number  
 59-6468900

Applied For  
 Not Applicable

5. Certificate of Status Desired  \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

LEVY, GERALD ;  
 1426 S.E. 44TH STREET  
 CAPE CORAL, FL 33904

7. Name and Address of New Registered Agent

Name  
 Street Address (P.O. Box Number is Not Acceptable)  
 City FL 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 \_\_\_\_\_  
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, 2007**

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

**Make check payable to Florida Department of State**

**10. OFFICERS AND DIRECTORS**

**11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10**

TITLE SD  Delete  
 NAME BARRIER, SUSAN  
 STREET ADDRESS 2008 SE 9TH TERRACE  
 CITY-ST-ZIP CAPE CORAL, FL 33990

TITLE SD  Change  Addition  
 NAME LISA VALENTINO  
 STREET ADDRESS 2536 S.W. 32nd ST.  
 CITY-ST-ZIP CAPE CORAL, FL 33914

TITLE VPD  Delete  
 NAME VAUGHN, ANN  
 STREET ADDRESS 2803 SE 22ND PL  
 CITY-ST-ZIP CAPE CORAL, FL 33904

TITLE VPD  Change  Addition  
 NAME MARSHALL MCLEAN  
 STREET ADDRESS 1953 S.E. 36th ST.  
 CITY-ST-ZIP CAPE CORAL, FL 33904

TITLE PD  Delete  
 NAME NEEDL, ROBERT M  
 STREET ADDRESS 1426 SE 44TH ST  
 CITY-ST-ZIP CAPE CORAL, FL 33904

TITLE D  Change  Addition  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE TD  Delete  
 NAME BARNHART, CHERYL  
 STREET ADDRESS 140 SW 29TH ST  
 CITY-ST-ZIP CAPE CORAL, FL 33914

TITLE  Change  Addition  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE  Delete  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE PD  Change  Addition  
 NAME GERALD LEVY  
 STREET ADDRESS 1426 S.E. 44th ST.  
 CITY-ST-ZIP CAPE CORAL, FL 33904

TITLE  Delete  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE  Change  Addition  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

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: *Gerald Levy* 1-07-07  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #