

# **2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 708843

**FILED**  
**Feb 12, 2010**  
**Secretary of State**

**Entity Name:** KIWANIS CLUB OF CAPE CORAL, FLORIDA, INC.

**Current Principal Place of Business:**

708 SE 47 TERR  
CAPE CORAL, FL 33904 US

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 6  
CAPE CORAL, FL 33910 US

**New Mailing Address:**

PO BOX 100006  
CAPE CORAL, FL 33910 US

**FEI Number:** 59-6468900

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

LEVY, GERALD  
1426 S.E. 44TH STREET  
CAPE CORAL, FL 33904 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: SD  
Name: MCLAUGHLIN, MARY  
Address: 1518 50TH ST, APT 101  
City-St-Zip: CAPE CORAL, FL 33914

Title: VP  
Name: HUBER, SAMUEL E  
Address: 4426 SE 10TH AVENUE  
City-St-Zip: CAPE CORAL, FL 33904

Title: T  
Name: SUPALO, RICHARD  
Address: 2013 NE 25TH STREET  
City-St-Zip: CAPE CORAL, FL 33909

Title: PD  
Name: HUTCHINSON, TRUDI  
Address: 9977 BIRR ST.  
City-St-Zip: FORT MYERS, FL 33919

Title: PE  
Name: CZECH, DONALD  
Address: 4234 SW 19TH PL  
City-St-Zip: CAPE CORAL, FL 33914

I hereby 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 all other like empowered.

**SIGNATURE:** WALLY V CORDELL

CPA

02/12/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date