2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 04, 2005
Secretary of State

DOCUMENT# 708861

Entity Name: KIWANIS CLUB OF WINTER HAVEN, INC.

Current Principal Place of Business:

16 BRIDGEWATER DR
WINTER HAVEN, FL 33884

New Principal Place of Business:

Current Mailing Address:

16 BRIDGEWATER DR
WINTER HAVEN, FL 33884

New Mailing Address:

FEI Number: 59-6144696 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SCHROEDER, B.J.
16 BRIDGEWATER DR
WINTER HAVEN, FL 33884 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: DP ( ) Delete
Name: RISHER, JOHN MR
Address: 1525 17TH. ST. NW
City-St-Zip: WINTER HAVEN, FL 33881

Title: D ( ) Delete
Name: BAKER, LISA
Address: 132 MILLER RD
City-St-Zip: WINTER HAVEN, FL 33884

Title: DT ( ) Delete
Name: SCHROEDER, B J MR
Address: 16 BRIDGEWATAER DR.
City-St-Zip: WINTER HAVEN, FL 33884

Title: DS ( ) Delete
Name: HOOSIER, BETTIE MRS
Address: 1519 OAKVIEW CIRCLE, SE
City-St-Zip: WINTER HAVEN, FL 33880

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition
Name: RISHER, JOHN MR
Address: 1525 17TH. ST. NW
City-St-Zip: WINTER HAVEN, FL 33881

Title: DP (X) Change ( ) Addition
Name: MERCER, TRACY MS
Address: 3558 HARBOR CIR. NW
City-St-Zip: WINTER HAVEN, FL 33881

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

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

I hereby certify that the information supplied with this filing does not qualify for the 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 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: B J SCHROEDER DT 01/04/2005

Electronic Signature of Signing Officer or Director — Date