

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 11, 2004 8:00 am
Secretary of State

03-11-2004 90022 038 ****61.25

DOCUMENT # 710321 1. Entity Name KIWANIS CLUB OF MIDTOWN, ST. PETERSBURG, FLORIDA, INC.					
Principal Place of Business 557 NORTHMOOR AVE. N. SAINT PETERSBURG, FL 33702			Mailing Address 557 NORTHMOOR AVE. N. SAINT PETERSBURG, FL 33702		
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country		
4. FEI Number 59-0690574				Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>				\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent			7. Name and Address of New Registered Agent		
FRENCH, RICHARD J 557 NORTHMOOR AVE. N. SAINT PETERSBURG, FL 33702			Name Street Address (P.O. Box Number is Not Acceptable) City <div style="display: flex; justify-content: space-between;"> FL Zip Code </div>		
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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>					
Filing Fee is \$61.25 Due by May 1, 2004		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$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	T		TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	FRENCH, RICHARD		NAME		
STREET ADDRESS	557 NORTHMOOR AVE N.		STREET ADDRESS		
CITY-ST-ZIP	SAINT PETERSBURG, FL 33702		CITY-ST-ZIP		
TITLE	V		TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
NAME	SMITH, JAMIE		NAME	Samson, Frederic	
STREET ADDRESS	3864 10TH ST. NE		STREET ADDRESS	3020 49th St. N.	
CITY-ST-ZIP	SAINT PETERSBURG, FL 33703		CITY-ST-ZIP	St. Petersburg, FL 33710	
TITLE	D		TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	FRENCH, MARY JO		NAME		
STREET ADDRESS	557 NORTHMOOR AVE. N.		STREET ADDRESS		
CITY-ST-ZIP	ST. PETERSBURG, FL 33702		CITY-ST-ZIP		
TITLE	D		TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
NAME	WILKINSON, BARRY		NAME	Bartlett, Ruth	
STREET ADDRESS	696 1ST. AVE. N., STE 201		STREET ADDRESS	10007 South Yacht Club Dr.	
CITY-ST-ZIP	SAINT PETERSBURG, FL 33701		CITY-ST-ZIP	Treasure Island, FL 33706	
TITLE	S		TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	KNOWLES, WILLIAM L.		NAME	Knowles, William L	
STREET ADDRESS	1307-41 AVE. NE		STREET ADDRESS	1307 41 Ave NE	
CITY-ST-ZIP	ST. PETERSBURG, FL		CITY-ST-ZIP	St. Petersburg, FL 33703	
TITLE	P		TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	RICH, ALICE		NAME	Rich, Alice	
STREET ADDRESS	3005 WEST ROBSON STREET		STREET ADDRESS	3005 West Robson Street	
CITY-ST-ZIP	TAMPA, FL 33614		CITY-ST-ZIP	Tampa, FL 33614	
12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(l), 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: <i>Richard J. French Jr.</i> Richard J. French Jr. 3/8/04 (727) 507-4336					
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>					