

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 712543

FILED
Feb 15, 2011
Secretary of State

Entity Name: KIWANIS CLUB OF MOUNT DORA, FLORIDA, INC.

Current Principal Place of Business:

C/O LAKESIDE INN
100 NORTH ALEXANDER STREET
MOUNT DORA, FL 32757 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 1277
PO BOX 1277
MOUNT DORA, FL 32756 US

New Mailing Address:

FEI Number: 59-6158904

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

STEPHENS, TOMMY E
179 BAY RD.
MOUNT DORA, FL 32751 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: P
Name: HICKS, LISA
Address: 192 KENTUCK BLUE CIRCLE
City-St-Zip: APOPKA, FL 32712

Title: ATD
Name: STEPHENS, TOMMY E
Address: 936 FAIRVIE AVE
City-St-Zip: MOUNT DORA, FL 32757

Title: D
Name: MERRELL, BEEBE
Address: PO BOX 874
City-St-Zip: MT. DORA, FL 32757

Title: TD
Name: MCCULLOUGH, SCOTT
Address: 1150 GROVE LANE
City-St-Zip: MOUNT DORA, FL 32757

Title: PED
Name: WHITNEY, JARET
Address: 18610 US HWY 441
City-St-Zip: MOUNT DORA, FL 32757

Title: SD
Name: HOECHST, CATHY
Address: 950 MCDONALD ST
City-St-Zip: MOUNT DORA, FL 32757

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: R. SCOTT MCCULLOUGH

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02/15/2011

Electronic Signature of Signing Officer or Director

Date