

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 713022

FILED  
Aug 07, 2008  
Secretary of State

**Entity Name:** KIWANIS CLUB OF WARRINGTON, FLORIDA, INC.

**Current Principal Place of Business:**

920 FAIRWAY DRIVE  
PENSACOLA, FL 32507

**New Principal Place of Business:**

**Current Mailing Address:**

P O BOX 4893  
PENSACOLA, FL 32507

**New Mailing Address:**

**FEI Number:** 59-6151469      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

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

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

SCHULZ, NORMAN  
920 FAIRWAY DRIVE  
PENSACOLA, FL 32507      US

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: D      ( ) Delete  
Name: CLEMENTS, A.J.  
Address: 6065 SCHOFIELD DRIVE  
City-St-Zip: PENSACOLA, FL 32506

Title: D      ( ) Delete  
Name: YEO, LARRY  
Address: 46 MANOR DRIVE  
City-St-Zip: PENSACOLA, FL 32507

Title: T      ( ) Delete  
Name: SCHULZ, NORMAN L  
Address: 920 FAIRWAY DRIVE  
City-St-Zip: PENSACOLA, FL 32507

Title: D      (X) Delete  
Name: GROVES, RAY  
Address: 5810 ADM. DOYLE BLVD  
City-St-Zip: PENSACOLA, FL 32506

Title: D      (X) Delete  
Name: RASCHKE, SHIRLEY  
Address: 334 MIZZEN LANE  
City-St-Zip: PENSACOLA, FL 32507

Title: D      ( ) Delete  
Name: GILL, ROBERT L.  
Address: 2031 BROYHILL LANE  
City-St-Zip: PENSACOLA, FL

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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

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

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

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 exemption stated 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 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: DANIEL L ROBERTS

DIR

08/07/2008

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date