2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 21, 2009
Secretary of State

DOCUMENT# 722019

Entity Name: KIWANIS CLUB OF SUN CITY CENTER, FLORIDA, INC.

Current Principal Place of Business:

231 COURTYARDS BLVD
SUN CITY CENTER, FL 33573 US

New Principal Place of Business:

Current Mailing Address:

404 LA JOLLA AVE.
SUN CITY CENTER, FL 33573 US

New Mailing Address:

FEI Number: 23-7190587 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

HALM, SALA
404 LAJOLLA AVE
SUN CITY CENTER, FL 33573 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	( ) Delete
Name:	LUNDY, CAROLYN	
Address:	705 GOLF & SEA BLVD.	
City-St-Zip:	APOLLO BEACH, FL 33572	
Title:	VP	( ) Delete
Name:	WILCOX, DELORES A	
Address:	612 FORT DUQUESNA DRIVE	
City-St-Zip:	SUN CITY CENTER, FL 33573	
Title:	VP	( ) Delete
Name:	PETERSON, MARVIN E	
Address:	103 SILVERBELL COURT	
City-St-Zip:	SUN CITY CENTER, FL 33573 US	
Title:	T	( ) Delete
Name:	RAWLINGS, DONALD N	
Address:	1507 BELLE GLADE AVE	
City-St-Zip:	SUN CITY CENTER, FL 33573 US	
Title:	S	( ) Delete
Name:	HALM, SALA	
Address:	404 LAJOLLA AVE	
City-St-Zip:	SUN CITY CENTER, FL 33573	
Title:	TA	(X) Delete
Name:	FINCH, CHARLES W	
Address:	303 CLUB MANOR DRIVE	
City-St-Zip:	SUN CITY CENTER, FL 33573	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:	P	(X) Change ( ) Addition
Name:	WILCOX, DELORES A	
Address:	612 FORT DUQUESNA DR	
City-St-Zip:	SUN CITY CENTER, FL 33573	
Title:	VP	(X) Change ( ) Addition
Name:	PETERSON, MARVIN E	
Address:	103 SILVERBELL CT	
City-St-Zip:	SUN CITY CENTER, FL 33573	
Title:	VP	(X) Change ( ) Addition
Name:	EAST, ROBERT	
Address:	1704 CLOISTER	
City-St-Zip:	SUN CITY CENTER, FL 33573 US	
Title:	T	(X) Change ( ) Addition
Name:	COUCH, PEGGY E	
Address:	3896 SUN CITY CENTER BLVD	
City-St-Zip:	SUN CITY CENTER, FL 33573 US	
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: DELORES A. WILCOX P 04/21/2009

Electronic Signature of Signing Officer or Director — Date