

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 726305

FILED
Feb 16, 2007
Secretary of State

Entity Name: WESTSIDE JACKSONVILLE KIWANIS CLUB FOUNDATION, INC.

Current Principal Place of Business:

6802 COMMONWEALTH AVE.
JACKSONVILLE, FL 32254 US

New Principal Place of Business:

Current Mailing Address:

P. O. BOX 16283
JACKSONVILLE, FL 32245 US

New Mailing Address:

FEI Number: 59-6168919

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WASMUND, WORTHY A
10254 MANORVILLE DR.
JACKSONVILLE, FL 32221 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: WASMUND, WORTHY A
Address: 10254 MANORVILLE DR
City-St-Zip: JACKSONVILLE, FL 32221 US

Title: T () Delete
Name: JAMMES, DENNIS J
Address: 7315 BOWDEN CIR. S.
City-St-Zip: JACKSONVILLE, FL 32216 US

Title: S () Delete
Name: JOHNSON, GLENN
Address: 1644 MAYVIEW RD
City-St-Zip: JACKSONVILLE, FL 322102218 US

Title: D () Delete
Name: GANEY, HARRY D
Address: 4979 WATEROAK LN.
City-St-Zip: JACKSONVILLE, FL 32210 US

Title: D () Delete
Name: BRADDOCK, THOMAS H
Address: 1628 S. FLETCHER AVE
City-St-Zip: FERNANDIA BEACH, FL 32034 US

Title: D () Delete
Name: DEAN, JAMES F JR
Address: 1704 MT.VERNON DR
City-St-Zip: JACKSONVILLE, FL 32221

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
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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 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: DENNIS JAMMES

TREA

02/16/2007

Electronic Signature of Signing Officer or Director

Date