726329

(Requestor's Name)					
(Address)					
(Address)					
(City/State/Zip/Phone #)					
PICK-UP WAIT MAIL					
(Business Entity Name)					
(Document Number)					
Certified Copies Certificates of Status					
Special lastructions to Filing Officer					
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14 FEB 24 AM 9: 30 SECRETARY OF STATE TALLAHASSEE, FLORIDA

FEB 2 5 2014 C. CARROTHERS

COVER LETTER

TO: Amendment Section Division of Corporations

SUBJECT: KIWANIS CLUB OF LONGBOAT KEY, INC.

Name of Corporation

726329

The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

STEPHEN D. SPANGLER

Name of Contact Person

CAVANAUGH & CO., LLP

Firm/Company

2381 FRUITVILLE RD.

Address

SARASOTA, FL 34237

City/State and Zip Code

KAW@CAVANAUGH-CO.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

STEPHEN D. SPANGLER

,941 \366-298

Name of Contact Person

Area Code & Daytime Telephone Number

Enclosed is a \$35.00 check made payable to the Department of State.

Mailing Address:

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

statement of cha	provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida & inge is submitted for a corporation organized under the laws of the State of _ r to change its registered office or registered agent, or both, in the State of I	FLORIDA		_	
1. The name of t	the corporation: KIWANIS CLUB OF LONGBOAT KEY, INC	•			
2. The principal	office address: 3402 WINDING OAKS DR.; LONGBOAT KE	EY, FL	342	28	
	D O DOY 9007 I ONCDOAT KEY EL	24229	——		
3. The mailing a	ddress (if different): P. O. BOX 8097; LONGBOAT KEY, FL	34220			
4. Date of incorporation/qualification: 05/03/1973 Document number: 726329					
	I street address of the current registered agent and registered office on file watment of State: (If resigned, enter resigned)	ith the			
	JOHN D. WILD, RESIGNED				
	3402 WINDING OAKS DR.				
	LONGBOAT KEY, FL 34228	TA Si			
6. The name and (if changed):	I street address of the new registered agent (if changed) and /or registered of	CRETAF	4 FEB 2	- T	
	STEPHEN D. SPANGLER	SEE,	24 A	177	
	2381 FRUITVILLE RD.	FLOR FLOR	AM 9:		
	P.O. Box NOT acceptable SARASOTA, FL 34237	DA	30		
The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.					
Such change wa authorized by th	as authorized by resolution duly adopted by its board of directors or by an ne board, or the corporation has been notified in writing of the change.	officer s	0		
Voka	JOHN D. WILD, SECRE Printed or Typed name and tit			_	
Hirther garee	the appointment as registered agent and agree to act in this capacity. to comply with the provisions of all statutes relative to the proper and com my duties, and I am familiar with and accept the obligation of my position is document is being filed merely to reflect a change in the registered offic that the corporation has been notified in writing of this change.	nplete n as regis ce addres	stered is, I		
Alg	Auture of Registered Agent 2-/0-) 4 Date				
If signing on behalf of an entity:					
<u> </u>	Yped or Printed Name				

* * * FILING FEE: \$35.00 * * *