2005 NOT-FOR-PROFIT CORPORATION **ANNUAL REPORT (AR)**

Mar 11, 2005 8:00 am DOGUMÊNT # 726478 **Secretary of State** 1. Entity Name 03-11-2005 90304 024 ****61.25 KIWANIS CLUB OF TALLAHASSEE NORTHSIDE, FLORIDA, INC. Principal Place of Business Mailing Address 1537 WOODGATE WAY 1537 WOODGATE WAY TALLAHASSEE FL 32308 TALLAHASSEE FL 32308 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 1st MOORE CR2E037 (10/04) City & State Applied For City & State 4. FEI Number 23-7194416 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent 'Name WILLIAMS, JAMES H. Street Address (P.O. Box Number is Not Acceptable) 1537 WOODGATE WAY TALLAHASSEE FL 32308 City Zip Code 8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and little if applicable (NOTE. Registered Agent signature required when reinstating) DATE FILE NOW: FEE IS \$61.25 Make Check Payable to 9. Election Campaign Financing \$5.00 May Be _ Due By May 1, 2005.⊘ Trust Fund Contribution. Added to Fees Florida Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. OFFICERS AND DIRECTORS White, Cleveland-4733 plantation view TITLE TITLE Change ☐ Addition Delete BOYD, MARY NAME NAME 1824 S MERIDIAN STREET STREET ADDRESS STREET ADDRESS Tollahousee, FL 32311 TALLAHASSEE FL 32301 CITY-ST-ZIP CITY-ST-ZIP Delete ☐ Addition ENG NIZM NARK, IVESTER NAME NAME 4484 FOXCROFT DR STREET ADDRESS STREET ADDRESS Follolissee, FC 37301 TALLAHASSEE FL 32309 CITY-ST-ZIP CITY-\$1-ZIP TITLE ☐ Delete ☐ Change Addition TITLE Horner MCKY 15 No Beston Woods Dr HARPER, MCRAY NAME NAME 2576 BETTON WOODS DR STREET ADDRESS STREET ADDRESS 15/4hosses FL 32368 TALLAHASSEE FL 32308 CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE **Change** Addition WHITE, CLEVELAND NAME NAME 4733 PLANTATION VIERI STREET ADDRESS STREET ADDRESS 15/15/18/see, FZ 37317 TALLAHASSEE FL 32311 CITY-ST-ZIP CITY-ST-7IP TITLE TITLE ☐ Defete Change ☐ Addition WILLIAMS, JAMES H NAME NAME 1537 WOODGATE WAY STREET ADDRESS STREET ADDRESS TALLAHASSEE FL 32308 CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered

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