2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 733985

FILED Feb 02, 2006 Secretary of State

Entity Name: KIWANIS CLUB OF NAPLES-ON-THE-GULF, FLORIDA, INC.

Current Principal Place of Business: New Principal Place of Business: C/O THOMAS F O'REILLY 1023 FIFTH AVENUE NORTH NAPLES FL 34102 **New Mailing Address: Current Mailing Address: BOX 656** NAPLES, FL 341060656 US FEI Number: 59-6576566 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: O'REILLY, THOMAS F 1023 FIFTH AVENUE NORTH NAPLES, FL 34102 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Change () Addition () Delete O'REILLY, THOMAS F Name: Name: 1023 FIFTH AVE NO Address: Address: City-St-Zip: NAPLES, FL 34102 City-St-Zip: Title: () Delete Title: (X) Change () Addition DALLMANN, BOB Name: VANDERBURG, ELLEN Name: Address: 97 HERITAGE WAY Address: 427 TERRACINA WAY City-St-Zip: NAPLES, FL 34110 City-St-Zip: NAPLES, FL 34119 Title: () Delete Title: () Change () Addition TUTTLE, FRED JR Name: Name: 138 9TH AVE SOUTH Address: Address: City-St-Zip: NAPLES, FL 34102 City-St-Zip: Title: VΡ () Delete Title: (X) Change () Addition Name: HENNELLS, SCOTT Name: HENNELLS, SCOTT 2697 LONGBOAT DR N Address: Address: 2697 LONGBOAT DR N City-St-Zip: NAPLES, FL 34104 City-St-Zip: NAPLES, FL 34104 Title: () Delete Title: () Change () Addition KLEIN, RICHARD Name: Name: 190 CENTER ST Address: Address: City-St-Zip: NAPLES, FL 34108 City-St-Zip: Title: () Delete Title: (X) Change () Addition BEDDOWS, CHUCK MCDONALD, TOM Name: Name: 3185 58TH ST SW Address: 4820 LASQUETI WAY Address: NAPLES, FL 34119 NAPLES, FL 34116 City-St-Zip: 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: THOMAS F O'REILLY SEC 02/02/2006