

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 733985

FILED
Jan 28, 2009
Secretary of State

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

Current Principal Place of Business:

C/O THOMAS F O'REILLY
1855 VETERAN'S PARK DR STE 203
NAPLES, FL 34109 US

New Principal Place of Business:

Current Mailing Address:

BOX 656
NAPLES, FL 341060656 US

New Mailing Address:

FEI Number: 59-6576566

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

O'REILLY, THOMAS F
1855 VETERAN'S PARK DR
NAPLES, FL 34109 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: S () Delete
Name: O'REILLY, THOMAS F
Address: 1855 VETERAN'S PARK DR, STE 203
City-St-Zip: NAPLES, FL 34109

Title: T () Delete
Name: PITSER, TOM
Address: 8863 VENTURA WAY
City-St-Zip: NAPLES, FL 34109

Title: VP () Delete
Name: MOSHER, RONALD
Address: 3524 WINDJAMMER CIR # 204
City-St-Zip: NAPLES, FL 34112

Title: D () Delete
Name: MARTYNIUK, RAY
Address: 15821 DELAPATA LN
City-St-Zip: NAPLES, FL 34110

Title: D () Delete
Name: KLEIN, RICHARD
Address: 3871 1ST AVE SW
City-St-Zip: NAPLES, FL 34117

Title: P () Delete
Name: MCDONALD, TOM
Address: 3185 58TH ST SW
City-St-Zip: NAPLES, FL 34116

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: P (X) Change () Addition
Name: MOSHER, RONALD
Address: 3524 WINDJAMMER CIR # 204
City-St-Zip: NAPLES, FL 34112

Title: VP (X) Change () Addition
Name: MARTYNIUK, RAY
Address: 15821 DELAPATA LN
City-St-Zip: NAPLES, FL 34110

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change () Addition
Name: ESQUIVEL, JOHN
Address: 465 8TH ST N
City-St-Zip: NAPLES, FL 34102

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: THOMAS F O'REILLY

SEC

01/28/2009

Electronic Signature of Signing Officer or Director

Date