

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 740204

FILED  
Feb 02, 2008  
Secretary of State

Entity Name: KIWANIS CLUB OF NORTH PORT, INC.

## Current Principal Place of Business:

14132 TAMiami TR  
NORTH PORT, FL 34287

## New Principal Place of Business:

## Current Mailing Address:

P.O. BOX 7222  
NORTH PORT, FL 34287

## New Mailing Address:

FEI Number: 51-0211185

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

COULTER, ROBERT G  
3145 PAAR CIRCLE  
PORT CHARLOTTE, FL 33981 US

## Name and Address of New Registered Agent:

COULTER, ROBERT G  
3145 PAAR CIRCLE  
PORT CHARLOTTE, FL 339811028 US

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: ROBERT G COULTER

02/02/2008

Electronic Signature of Registered Agent

Date

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: HAUGH, WILLIAM P  
Address: 2631 TOMASO  
City-St-Zip: NORTH PORT, FL 34287

Title: D ( ) Delete  
Name: FRASER, JOANN  
Address: 2984 TUSKET AVENUE  
City-St-Zip: NORTH PORT, FL 34286

Title: D ( ) Delete  
Name: LOCKHART, RICHARD  
Address: 6750 MYRTLEWOOD RD.  
City-St-Zip: NORTH PORT, FL 34287

Title: D ( ) Delete  
Name: PATAKY, DOLORES  
Address: 5972 NIBLICK CIRCLE  
City-St-Zip: NORTH PORT, FL 34287

Title: T ( ) Delete  
Name: GOODCUFF, JANIS W  
Address: 3520 ISLAND CLUB DR. #3  
City-St-Zip: NORTH PORT, FL 34287

Title: D ( ) Delete  
Name: COULTER, ROBERT G  
Address: 3145 PAAR CIRCLE  
City-St-Zip: PORT CHARLOTTE, FL 339811028

## 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  
Name:  
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 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: ROBERT G COULTER

D

02/02/2008

Electronic Signature of Signing Officer or Director

Date