2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Aug 15, 2010
Secretary of State

DOCUMENT# 740204

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 34290

New Mailing Address:

PO BOX 7222
NORTH PORT, FL 34292

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 339811028 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: P
Name: PALM-ABRAMOFF, CAROLANN
Address: 1100 JONAH DRIVE
City-St-Zip: NORTH PORT, FL 34289

Title: S
Name: FRASER, JOANN
Address: 2984 TUSKET AVENUE
City-St-Zip: NORTH PORT, FL 34286

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

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

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

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

I hereby 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 all other like empowered.

SIGNATURE: ROBERT G. COULTER D 08/15/2010

Electronic Signature of Signing Officer or Director — Date