2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT DOCUMENT #747165

FILED Jan 16, 2007 8:00 am Secretary of State

| 1. Entity Name KIWANIS CLUB OF SEMINOLE SUNRISE, SANFORD, FLORIDA, INC. | | | | | | | | ^ | | | - | ****61.2 | |
|---|---|---|--------------------|---|---|--|--|---|------------------------------|------------------------------------|-------------------------|--|------------------------------|
| 114 N. PARK AVE. 114 | | | | iling Address 4 N. PARK AVE. NFORD, FL 32771-1240 | | | | | - | | | | |
| Principal Place of Business - No P.O. Box # 3. Mailing Address | | | | | Address | | | | | | | | |
| Suite, Apt. #, etc. | | | Suit | Suite, Apt. #, etc. | | | | 01052007 | Chg- | NP | CR2E03 | 37 (12/06) | |
| City & State | | | City | City & State | | | | 4. FEI Number Applied For 59-6569174 Not Applicable | | | | | |
| Zip Country | | Zip | Zip (| | ntry | | | | | \$8.75 Ad Fee Require | | | |
| 6. Name and Address of Current Registered Agent | | | | | | | | 7. Name an | d Addres | s of New F | Registered / | Agent | |
| MCKIBBIN, BRUCE | | | | | Name Street Address | | | O Pay Numb | har in Alai | Assatable | | | |
| 114 N. PARK AVE. SANFORD, FL 32771-1240 | | | | | Street Address (P.O. Box Number is Not Acceptable) | | | | | | | | |
| | | | | City | | | · | | | | FL | Zip Cod | le |
| | | bmits this statement fo | r the purpo | ose of changing its | registere | ed office or r | registere | ed agent, or b | oth, in the | State of FI | orida. I am | familiar with. | and accept |
| the obligati | ions of registere | d agent. | | | | | | | | | | | |
| | | * ************************************ | | | | | | | | | | | |
| SIGNATURE | | | | | | | | | | | | | |
| , SIGNATURE . | Signature, typed or pr | rinted name of registered agent | and title if appli | icable. (NOTE | : Registered | d Agent signatur | re required | when reinstating) | | | DATÉ | | |
| , SIGNATURE . | Signature, typed or profiling Fee in Due by May | is \$61.25 | and title if appli | 9. Election Care Trust Fund C | npaign F | inancing | F-1 | \$5.00 May Added to Fee | | | lake chec | c payable t | |
| 10. | Filing Fee i Due by May | is \$61.25 | | 9. Election Care Trust Fund C | npaign Fr Contributi | inancing ion. [| | \$5.00 May | s | Flo | lake chec rida Depar | tment of S | N 10 |
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I nereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplied enter lebort 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 repeiver of trusteel 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 a federal same appears.

SIGNATURE:

Bruce McKibbin

1/10/2007

407-322-0331

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date Daytime Phone #