

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Mar 06, 2006 8:00 am
Secretary of State

03-06-2006 90028 033 ****61.25

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1. Entity Name

KIWANIS CLUB OF NORTH FORT MYERS, INC.

Principal Place of Business

**17890 WETSTONE RD
FORT MYERS FL 33917**

Mailing Address

**P.O. BOX 2036
FT MYERS FL 33903-2036**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

56-0124207

Applied

Not Appl

5. Certificate of Status Desired

☐

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**MORROW, ROBERT G
15 MIDDLETON CT
FORT MYERS FL 33903**

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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. I am familiar with, and acc the obligations of registered agent

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when re-appointing)

DATE

**FILE NOW: FEE IS \$81.25
Due By May 1, 2006**

9. Election Campaign Financing
Trust Fund Contribution

☐

**\$5.00 May Be
Added to Fees**

**Make Check Payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE	D	NAME	GARWOOD, EUGENE	☐ Delete
STREET ADDRESS	17890 WETSTONE RD			
CITY - ST - ZIP	NORTH FORT MYERS FL 33917			
TITLE	D	NAME	GARWOOD, MELVA	☐ Delete
STREET ADDRESS	17890 WETSTONE RD			
CITY - ST - ZIP	NORTH FORT MYERS FL 33917			
TITLE	TD	NAME	MORROW, ROBERT G.	☐ Delete
STREET ADDRESS	15 MIDDLETON CT			
CITY - ST - ZIP	FORT MYERS FL 33903			
TITLE	P/D	NAME	LIDDEL, DAVID S JR.	☒ Delete
STREET ADDRESS	5644 LOCHNESS CT			
CITY - ST - ZIP	NORTH FORT MYERS FL 33903-4928			
TITLE	D	NAME	SPURLOCK, PAUL L	☒ Delete
STREET ADDRESS	18350 CONGRESSIONAL CT			
CITY - ST - ZIP	NORTH FORT MYERS FL 33903-6663			
TITLE	D	NAME	CARROLL, MICHAEL	☒ Delete
STREET ADDRESS	3540 GLOXINA DR.			
CITY - ST - ZIP	N. FT. MYERS FL 33917			

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	PRES/DIR	NAME	HUBBARD, HELEN	☐ Change ☒ Add
STREET ADDRESS	901 SE 31ST TERRACE			
CITY - ST - ZIP	CAPE CORAL, FL 33904			
TITLE	DIR	NAME	SETTLE, CHARLES	☐ Change ☒ Add
STREET ADDRESS	558 HOGAN			
CITY - ST - ZIP	N. FT. MYERS, FL 33903			
TITLE	DIR	NAME	NORRIS, STEPHANIE	☐ Change ☒ Add
STREET ADDRESS	18171 DURRANCE RD			
CITY - ST - ZIP	N. FT. MYERS, FL 33917			
TITLE	DIR	NAME	GEIGER, MARIAN	☐ Change ☒ Add
STREET ADDRESS	1386 BURT WOOD DR.			
CITY - ST - ZIP	FT MYERS, FL 33901			
TITLE	SEC - DIR	NAME	CARROLL, MICHAEL	☒ Change ☐ Add
STREET ADDRESS	3540 GLOXINA DR			
CITY - ST - ZIP	N. FT MYERS, FL 33917			

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report 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 receiver or trustee 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 an address, with all other like empowered

SIGNATURE: Robert G. Morrow **ROBERT G. MORROW** **FEB 24, 2006** **(239) 652-9296**