

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 02, 2006 8:00 am
Secretary of State

05-02-2006 90253 001 ***122.50

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1. Entity Name
KIWANIS CLUB OF GULF COAST FOUNDATION, INC.



Principal Place of Business
**5142 FAR OAKS CIRCLE
SARASOTA, FL 34238**

Mailing Address
**1432 FIRST STREET
SARASOTA, FL 34236**

66013523



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

04282006 Chg-NP CR2E037 (4/06)

4. FEI Number
59-2288747

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

**DRAKE, J. KEVIN
1432 FIRST STREET
SUITE C
SARASOTA, FL 34236**

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 accept the obligations of registered agent.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$61.25
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 **TD** ☐ Delete
NAME **WORTHINGTON, MICHAEL**
STREET ADDRESS **3793 STERLING ROAD**
CITY-ST-ZIP **VENICE, FL 34293**

TITLE **PD** ☐ Delete
NAME **FLEEMAN, BILL**
STREET ADDRESS **4713 MEADOW VIEW CIRCLE**
CITY-ST-ZIP **SARASOTA, FL 34233**

TITLE **D** ☐ Delete
NAME **LANIER, JAMES H**
STREET ADDRESS **8510 COASH LANE**
CITY-ST-ZIP **SARASOTA, FL 34241**

TITLE **SD** ☒ Delete
NAME **SCHILLER, IRWIN**
STREET ADDRESS **5142 FAR OAK CIRCLE**
CITY-ST-ZIP **SARASOTA, FL 34238**

TITLE **D** ☐ Delete
NAME **SALMON, BARNEY**
STREET ADDRESS **1891 WISTERIA STREET**
CITY-ST-ZIP **SARASOTA, FL 34239**

TITLE **D** ☐ Delete
NAME **ST PIERRE, FRANK**
STREET ADDRESS **7901 UMBRELLA PINE WAY**
CITY-ST-ZIP **SARASOTA, FL 34241**

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☒ Change ☐ Addition
NAME **D Fleeman, Bill**
STREET ADDRESS **4713 Meadow View Circle**
CITY-ST-ZIP **Sarasota, FL 34233**

TITLE ☒ Change ☐ Addition
NAME **Lanier, James H., Sr.**
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☒ Addition
NAME **SD Wells, Ira**
STREET ADDRESS **5599 Camelford Terrace**
CITY-ST-ZIP **Sarasota, FL 34233**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby 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 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Michael K Worthington
Treasurer

4/28/06
Date

941-929-9000
Daytime Phone #