

**2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED  
Apr 08, 2007  
Secretary of State**

DOCUMENT# N00000007531

Entity Name: KILLEARN KIWANIS CHARITIES, INCORPORATED

**Current Principal Place of Business:**

3805 LEANE DRIVE  
TALLAHASSEE, FL 32309

**New Principal Place of Business:**

**Current Mailing Address:**

3805 LEANE DRIVE  
TALLAHASSEE, FL 32309

**New Mailing Address:**

FEI Number: 59-3683882      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

BARGER, JR., STEPHEN J  
3805 LEANE DRIVE  
TALLAHASSEE, FL 32309      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: D      ( ) Delete  
Name: BARGER, JR, STEPHEN J  
Address: 3805 LEANE DRIVE  
City-St-Zip: TALLAHASSEE, FL 32309

Title: D      ( ) Delete  
Name: DOWNING, PAUL  
Address: 2035 DUNEAGLE LANE  
City-St-Zip: TALLAHASSEE, FL 32317

Title: D      ( ) Delete  
Name: ROBBINS, JOHN  
Address: 3080 WHITE IBIS WAY  
City-St-Zip: TALLAHASSEE, FL 32309

Title: D      ( ) Delete  
Name: DOYAL, FRANCIS M  
Address: 6152 PIMLICO CT  
City-St-Zip: TALLAHASSEE, FL 32309

**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:

I hereby certify that the information supplied with this filing does not qualify for the 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: STEPHEN J. BARGER, JR.

TREA

04/08/2007

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date