2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000003138

FILED Mar 24, 2005 Secretary of State

Entity Name: KIWANIS CLUB OF PALM BAY, INCORPORATED

Current Principal Place of Business: 1670 WACO BOULEVARD SE PALM BAY, FL 32909 Current Mailing Address:		New Principal Place of Business:	New Principal Place of Business:		
		1124 ESSEN AVE NW PALM BAY, FL 32907			
		New Mailing Address:	New Mailing Address:		
PO BOX [*] PALM BA	111125 NY, FL 32911				
FEI Numbe	er: FEI Number Applied For ()	FEI Number Not Applicable (X) Certificate of Status Desire	ed ()		
Name an	d Address of Current Registered Agent:	Name and Address of New Registered Agent:			
MCGOVERN, JUDY 1670 WACO BOULEVARD SE PALM BAY, FL 32909 US		PHELPS, DEBBIE 1124 ESSEN AVE NW PALM BAY, FL 32907 US			
	re named entity submits this statement for the te of Florida.	e purpose of changing its registered office or registered agent,	or both		
SIGNATU	JRE: DEBBIE PHELPS	03/24/2005			
	Electronic Signature of Registered A	Agent Date			
OFFICER	RS AND DIRECTORS:	ADDITIONS/CHANGES TO OFFICERS AND DI	RECTO		
Title: Name: Address: City-St-Zip:	PD () Delete PHELPS, DEBBIE 1124 ESSEN AVENUE NW PALM BAY, FL 32907	Title: () Change () Addition Name: Address: City-St-Zip:			
Title: Name: Address: City-St-Zip:	VD () Delete ARNOLD, JOHN 815 BRIAR CREEK BLVD NE PALM BAY, FL 32905	Title: VD (X) Change () Addition Name: DEBBIE PHELPS, Address: 1124 ESSEN AVE NW City-St-Zip: PALM BAY, FL 32907			
Title: Name: Address:	SD () Delete DANAS, CECELIA 1399 ASHBORO CIRCLE SE PALM BAY, FL 32909	Title: () Change () Addition Name: Address: City-St-Zip:			
City-St-Zip: Title: Name: Address:	TD () Delete MCGOVERN, JUDY 1670 WACO BLVD SE PALM BAY, FL 32909	Title: () Change () Addition Name: Address: City-St-Zip:			
City-St-Zip: Title: Name: Address: City-St-Zip: Title: Name: Address: City-St-Zip:	MCGOVERN, JUDY 1670 WACO BLVD SE PALM BAY, FL 32909 D () Delete SIMS, OLGA 5340 WHITE HERON LANE	Name: Address:			

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: DEBBIE PHELPS PD 03/24/2005