2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03020

FILED Mar 03, 2011 Secretary of State

Entity Name: KIWANIS CLUB OF LABELLE, FLORIDA, INC.

Current Principal Place of Business: New Principal Place of Business:

155 S. BRIDGE ST. LABELLE, FL 33935

Current Mailing Address: New Mailing Address:

P.O. BOX 2161 LABELLE, FL 33975

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired ()

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

ROACH, KARAN S 431 CALOOSA ESTATES DRIVE LABELLE, FL 33935 US

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: PP

Name: BROOM, LYNELL Address: 872 TRADER ROAD City-St-Zip: LABELLE, FL 33935

Title: F

Name: HENDRICKSON, NANCY Address: PO BOX 1482 City-St-Zip: LABELLE, FL 33975

Title: S

Name: ROACH, KARAN S

Address: 431 CALOOSA ESTATES DRIVE

City-St-Zip: LABELLE, 33935

Title: T

 Name:
 SOUD, CHRIS

 Address:
 PO BOX 2956

 City-St-Zip:
 LABELLE, FL 33975

Title:

 Name:
 BACKES, DOREEN

 Address:
 26025 OLD MUSE RD SW

 City-St-Zip:
 LABELLE, FL 33935

Title:

Name: WAGNON, MILLARD
Address: 2230 WAYLIFE COURT
City-St-Zip: ALVA, FL 33920

I hereby 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 all other like empowered.

SIGNATURE: CHRIS SOUD T 03/03/2011