2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000011118

FILED Feb 04, 2010 Secretary of State

Entity Name: KIWANIS CLUB OF FT. KING AT OCALA, FLORIDA, INC.

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

ELKS LODGE #286 702 N.E. 25 AVE OCALA, FL 344706318

Current Mailing Address: New Mailing Address:

KIWANIS CLUB OF FORT KING OCALA P.O. BOX 6835 OCALA, FL 344786835

FEI Number: 74-3039971 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

COLE, JANICE 4551 S.E. 39TH COURT OCALA, FL 34480 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: F

 Name:
 GUYTON, KATHRINE

 Address:
 P.O. BOX 6835

 City-St-Zip:
 OCALA, FL 344786835

Title: ∨

 Name:
 WILSON, JUDY DR.

 Address:
 P.O. BOX 6835

 City-St-Zip:
 OCALA, FL 344786835

Title: S

 Name:
 CLAUDIO, LAINIE

 Address:
 P.O. BOX 6835

 City-St-Zip:
 OCALA, FL 344786835

Title:

Name: LAURIE, DON Address: P.O. BOX 6835

City-St-Zip: OCALA, FL 344786835

Title:

 Name:
 BARBER, KET

 Address:
 P.O. BOX 6835

 City-St-Zip:
 OCALA, FL 344786835

Title:

 Name:
 PICCIN, JOHN

 Address:
 P.O. BOX 6835

 City-St-Zip:
 OCALA, FL 344786835

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: DON LAURIE T 02/04/2010