

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000002937

FILED
Jan 23, 2008
Secretary of State

Entity Name: ESTERO-GULF COAST KIWANIS CLUB, INC

Current Principal Place of Business:

20280 GRANDE OAK SHOPPES BLVD
ESTERO, FL 33928

New Principal Place of Business:

Current Mailing Address:

PO BOX 930
ESTERO, FL 33928

New Mailing Address:

FEI Number: 20-2153569

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CARR, PAUL A
23400 OLDE MEADOWBROOK CIR
BONITA SPRINGS, FL 34134 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: P () Delete
Name: ENNIS, PETER
Address: PO BOX 930
City-St-Zip: ESTERO, FL 33928

Title: VP () Delete
Name: WOBROCK, MIKE
Address: PO BOX 930
City-St-Zip: ESTERO, FL 33928

Title: S () Delete
Name: STONE, JODI
Address: PO BOX 930
City-St-Zip: ESTERO, FL 33928

Title: T () Delete
Name: BUTIKOFER, CURTIS
Address: 19321 PINE GLEN DR
City-St-Zip: FORT MYERS, FL 33967

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: ENNIS, PETER
Address: PO BOX 930
City-St-Zip: ESTERO, FL 33928

Title: P (X) Change () Addition
Name: WOBROCK, MIKE
Address: PO BOX 930
City-St-Zip: ESTERO, FL 33928

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 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: CURTIS BUTIKOFER

T

01/23/2008

Electronic Signature of Signing Officer or Director

Date