2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000008113

City-St-Zip:

FORT MYERS, FL 33901

Apr 23, 2009 Secretary of State

Entity Name: KIWANIS CLUB OF FORT MYERS-METRO INC

Current Principal Place of Business: New Principal Place of Business: 12148 S. CLEVELAND AVE. 2855 COLONIAL BOULEVARD FORT MYERS, FL 33907 FORT MYERS, FL 33966 **Current Mailing Address: New Mailing Address:** P.O. BOX 7493 FORT MYERS, FL 33911 FEI Number: 01-0869691 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of New Registered Agent: Name and Address of Current Registered Agent: NEWELL, DEBRA A KING, PATRICK D 4670 SUMMERLIN RD 2671 SWAMP CABBAGE CT. US FORT MYERS, FL 33901 FORT MYERS, FL 33919 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: PATRICK D. KING 04/23/2009 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition GRAHAM, SHERRI Name: Name: 1021 SE 24TH ST Address: Address: City-St-Zip: CAPE CORAL, FL 33990 City-St-Zip: Title: () Delete Title: () Change () Addition Name: PELLE, HANNAH Name: Address: 8290 SUMNER AVE Address: City-St-Zip: FORT MYERS, FL 33908 City-St-Zip: Title: () Delete Title: () Change () Addition NEWELL, DEBRA Name: Name: 4670 SUMMERLIN RD Address: Address: City-St-Zip: FORT MYERS, FL 33919 City-St-Zip: Title: () Delete Title: () Change () Addition Name: KING, PATRICK Name: 2671 SWAMP CABBAGE COURT Address: Address:

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.

City-St-Zip:

SIGNATURE: PATRICK D. KING SEC 04/23/2009