

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED  
Mar 18, 2009  
Secretary of State

DOCUMENT# N06000009219

Entity Name: KIWANIS CLUB OF BAKER COUNTY, INC.

## Current Principal Place of Business:

595 SOUTH SIXTH STREET  
MACCLENNY, FL 32063 US

## New Principal Place of Business:

480 W. LOWDER STREET  
MACCLENNY, FL 32063 US

## Current Mailing Address:

595 SOUTH SIXTH STREET  
MACCLENNY, FL 32063 US

## New Mailing Address:

P.O. BOX 1484  
MACCLENNY, FL 32063 US

FEI Number: 20-5468208

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

CROFT, MARGIE  
595 SOUTH SIXTH STREET  
MACCLENNY, FL 32063 US

## Name and Address of New Registered Agent:

COLLINS, DENNIS G  
1171 SOUTH 6TH STREET  
MACCLENNY, FL 32063 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: DENNIS G. COLLINS

03/18/2009

Electronic Signature of Registered Agent

Date

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: OGLESBY, CINDY  
Address: 595 SOUTH SIXTH STREET  
City-St-Zip: MACCLENNY, FL 32063 US

Title: VP ( ) Delete  
Name: JOE, RUISE  
Address: 595 SOUTH SIXTH STREET  
City-St-Zip: MACCLENNY, FL 32063 US

Title: S ( ) Delete  
Name: BECKER, JUDY  
Address: 595 SOUTH SIXTH STREET  
City-St-Zip: MACCLENNY, FL 32063 US

Title: T ( ) Delete  
Name: MARGIE, CROFT  
Address: 595 SOUTH SIXTH STREET  
City-St-Zip: MACCLENNY, FL 32063 US

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: RUISE, JOE  
Address: P.O. BOX 1484  
City-St-Zip: MACCLENNY, FL 32063 US

Title: VP (X) Change ( ) Addition  
Name: COLLINS, DENNIS G  
Address: P.O. BOX 1484  
City-St-Zip: MACCLENNY, FL 32063 US

Title: S (X) Change ( ) Addition  
Name: JONES, STEVEN  
Address: P.O. BOX 1484  
City-St-Zip: MACCLENNY, FL 32063 US

Title: T (X) Change ( ) Addition  
Name: OCA, FREDDIE  
Address: P.O. BOX 1484  
City-St-Zip: MACCLENNY, FL 32063 US

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: DENNIS G. COLLINS

VP

03/18/2009

Electronic Signature of Signing Officer or Director

Date