

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000009219

FILED  
Jan 14, 2010  
Secretary of State

**Entity Name:** KIWANIS CLUB OF BAKER COUNTY, INC.

**Current Principal Place of Business:**

480 W. LOWDER STREET  
MACCLENNY, FL 32063 US

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 1484  
MACCLENNY, FL 32063 US

**New Mailing Address:**

FEI Number: 20-5468208

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

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

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

JONES, STEVEN M  
511 MARTIN L. KING DR.  
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: STEVEN M. JONES

01/14/2010

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: P  
Name: WATKINS, TINA  
Address: P.O. BOX 1484  
City-St-Zip: MACCLENNY, FL 32063 US

Title: VP  
Name: WOODS, JOSH  
Address: P.O. BOX 1484  
City-St-Zip: MACCLENNY, FL 32063 US

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

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

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: STEVEN M. JONES

SEC

01/14/2010

Electronic Signature of Signing Officer or Director

Date