


2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 19, 2007 8:00 am
Secretary of State

03-19-2007 90070 018 ****61.25

DOCUMENT # N06297

1. Entity Name
 KIWANIS CLUB OF JACKSONVILLE BEACHES, FLORIDA, INC.



Principal Place of Business
 4043 E RICHMOND PK DR.
 JACKSONVILLE, FL 32224 US

Mailing Address
 4043 E RICHMOND PK DR.
 JACKSONVILLE, FL 32224 US

40037833



2. Principal Place of Business - No P.O. Box #
 Suite, Apt. #, etc.

3. Mailing Address
 Suite, Apt. #, etc.

03152007 Chg-NP CR2E037 (12/06)

City & State
 Zip Country

4. FEI Number
 59-2332110

Applied For
 Not Applicable

5. Certificate of Status Desired \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
 NOE, WILLIAM G., JR.
 599 ATLANTIC BLVD.
 SUITE 6
 ATLANTIC BEACH, FL 32233

7. Name and Address of New Registered Agent
 Name Ralph Marcello
 Street Address (P.O. Box Number is Not Acceptable)
4043 Richmond Park Dr
 City Jacksonville FL Zip Code 32224

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE R. Marcello R.T. Marcello DATE 3/15/07
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

Filing Fee is \$61.25
Due by May 1, 2007

9. Election Campaign Financing Trust Fund Contribution. \$5.00 May Be Added to Fees

Make check payable to Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Delete
PD	LAFOND, DONALD E	PO BOX 331591	ATLANTIC BEACH, FL 32233	<input checked="" type="checkbox"/>
VD	ROBINSON, EDWARD	12996 HUNTLEY MANOR DR.	JACKSONVILLE, FL 32224	<input checked="" type="checkbox"/>
TD	MARCELLO, RALPH	4043 E. RICHMOND PK. DR.	JACKSONVILLE, FL 32224	<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input checked="" type="checkbox"/> Change	<input type="checkbox"/> Addition
PD	Robinson, Edward	12996 Huntley Manor Dr	Jacksonville, FL 32224	<input checked="" type="checkbox"/>	<input type="checkbox"/>
VD	Rowell, Neil	16012 St. North	Jacksonville Beach FL 32250	<input checked="" type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: R. Marcello F.T. Marcello Date 3/15/07 Daytime Phone # 241-1222
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR