2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000005386

FILED Apr 30, 2009 Secretary of State

Entity Name: KIWANIS CLUB OF SAN CARLOS PARK - ESTERO INC.

| P.O. BOX 1298 ESTERO, FL 33928 FEI Number: 59-2161758 FEI Number Applied For () FEI Number Not Applied For () FEI Number | |
|--|---|
| FEI Number: 59-2161758 FEI Number Applied For () FEI Number Not Applied For () FEI Number N | |
| FEI Number: 59-2161758 FEI Number Applied For () FEI Number Not Ap Name and Address of Current Registered Agent: Name an GRAHAM, KEVIN 18419 CAMELLIA RD FORT MYERS, FL FL US The above named entity submits this statement for the purpose of changing in the State of Florida. SIGNATURE: Electronic Signature of Registered Agent OFFICERS AND DIRECTORS: ADDITIO Title: P () Delete Title: Name: Address: 3612 SW 3RD AVE Address: 3612 SW 3RD AVE Address: City-St-Zip: CAPE CORAL, FL 33914 City-St-Zip: Title: SEC () Delete Name: MERRIAM, KUSHNER Name: Address: 7571 WINGED FOOT CIRCLE Address: 7571 WINGED FOOT CIRCLE Address: Title: TRES () Delete Title: Name: Address: 18419 CAMELLIA RD Address: | ling Address: |
| Name and Address of Current Registered Agent: GRAHAM, KEVIN 18419 CAMELLIA RD FORT MYERS, FL FL US The above named entity submits this statement for the purpose of changing in the State of Florida. SIGNATURE: Electronic Signature of Registered Agent OFFICERS AND DIRECTORS: ADDITIO OFFICERS AND DIRECTORS: Title: P () Delete Title: Name: DEVLIN, LARRY Name: Address: 3612 SW 3RD AVE Address: City-St-Zip: CAPE CORAL, FL 33914 Title: SEC () Delete Title: Name: MERRIAM, KUSHNER Name: Address: 7571 WINGED FOOT CIRCLE City-St-Zip: FORT MYERS, FL 33967 Title: TRES () Delete Title: Name: GRAHAM, KEVIN Name: Address: 18419 CAMELLIA RD Address: City-St-Zip: FORT MYERS, FL 33967 Title: DIR () Delete Title: Name: CORDELL, WALLY Name: Address: 8144 NEW JERSEY BLVD Address: City-St-Zip: FORT MYERS, FL 33967 Title: DIR () Delete Title: Name: CORDELL, WALLY Name: Address: 8144 NEW JERSEY BLVD Address: City-St-Zip: FORT MYERS, FL 33967 Title: DIR () Delete Title: | |
| GRAHAM, KEVIN 18419 CAMELLIA RD FORT MYERS, FL FL US The above named entity submits this statement for the purpose of changing in the State of Florida. SIGNATURE: Electronic Signature of Registered Agent OFFICERS AND DIRECTORS: ADDITIO OFFICERS AND DIRECTORS: Ititle: P () Delete Title: Name: DEVLIN, LARRY Address: 3612 SW 3RD AVE City-St-Zip: CAPE CORAL, FL 33914 City-St-Zip: CAPE CORAL, FL 33914 Title: SEC () Delete Title: Name: MERRIAM, KUSHNER Name: Address: 7571 WINGED FOOT CIRCLE City-St-Zip: FORT MYERS, FL 33967 City-St-Zip: Title: TRES () Delete Title: Name: GRAHAM, KEVIN Name: Address: 18419 CAMELLIA RD Address: City-St-Zip: FORT MYERS, FL 33967 City-St-Zip: Title: DIR () Delete Title: Name: CORDELL, WALLY Name: Address: 8144 NEW JERSEY BLVD Address: City-St-Zip: FORT MYERS, FL 33967 City-St-Zip: Title: DIR () Delete Title: | plicable () Certificate of Status Desired () |
| The above named entity submits this statement for the purpose of changing in the State of Florida. SIGNATURE: Electronic Signature of Registered Agent OFFICERS AND DIRECTORS: ADDITION OFFICERS AND DIRECTORS: Fittle: P () Delete Name: | d Address of New Registered Agent: |
| in the State of Florida. SIGNATURE: Electronic Signature of Registered Agent OFFICERS AND DIRECTORS: OFFICERS AND DIRECTORS: OFFICERS AND DIRECTORS: OFFICERS AND DIRECTORS: Title: Name: DEVLIN, LARRY Address: 3612 SW 3RD AVE City-St-Zip: CAPE CORAL, FL 33914 City-St-Zip: Title: Name: MERRIAM, KUSHNER Address: 7571 WINGED FOOT CIRCLE City-St-Zip: FORT MYERS, FL 33967 Title: TRES O Delete Name: GRAHAM, KEVIN Address: 18419 CAMELLIA RD Address: City-St-Zip: FORT MYERS, FL 33967 Title: DIR O Delete Name: CORDELL, WALLY Address: 8144 NEW JERSEY BLVD Address: City-St-Zip: FORT MYERS, FL 33967 City-St-Zip: Title: DIR O Delete Title: Name: Address: 8144 NEW JERSEY BLVD Address: City-St-Zip: FORT MYERS, FL 33967 Title: DIR O Delete Title: T | |
| Electronic Signature of Registered Agent OFFICERS AND DIRECTORS: Title: P () Delete Name: DEVLIN, LARRY Address: 3612 SW 3RD AVE City-St-Zip: CAPE CORAL, FL 33914 Title: SEC () Delete Name: MERRIAM, KUSHNER Address: 7571 WINGED FOOT CIRCLE City-St-Zip: FORT MYERS, FL 33967 Title: TRES () Delete Name: GRAHAM, KEVIN Address: 18419 CAMELLIA RD City-St-Zip: FORT MYERS, FL 33967 Title: DIR () Delete Name: CORDELL, WALLY Address: 8144 NEW JERSEY BLVD City-St-Zip: FORT MYERS, FL 33967 Title: DIR () Delete Name: CORDELL, WALLY Address: 8144 NEW JERSEY BLVD City-St-Zip: FORT MYERS, FL 33967 Title: DIR () Delete Title: Title: Name: CORDELL, WALLY Address: 8144 NEW JERSEY BLVD City-St-Zip: FORT MYERS, FL 33967 Title: DIR () Delete Title: Title: Title: Title: Name: CORDELL, WALLY Address: 8144 NEW JERSEY BLVD City-St-Zip: FORT MYERS, FL 33967 Title: DIR () Delete Title: Tit | its registered office or registered agent, or both, |
| OFFICERS AND DIRECTORS: Title: P () Delete Title: Name: DEVLIN, LARRY Address: 3612 SW 3RD AVE City-St-Zip: CAPE CORAL, FL 33914 City-St-Zip: Title: SEC () Delete Title: Name: MERRIAM, KUSHNER Name: Address: 7571 WINGED FOOT CIRCLE Address: City-St-Zip: FORT MYERS, FL 33967 City-St-Zip: Title: TRES () Delete Title: Name: GRAHAM, KEVIN Name: GRAHAM, KEVIN Address: 18419 CAMELLIA RD Address: 18419 CAMELLIA RD Address: City-St-Zip: FORT MYERS, FL 33967 City-St-Zip: Title: DIR () Delete Title: Name: CORDELL, WALLY Name: Address: 8144 NEW JERSEY BLVD Address: 8144 NEW JERSEY BLVD Address: City-St-Zip: FORT MYERS, FL 33967 City-St-Zip: Title: DIR () Delete Title: DIR () Delete Title: Title | |
| Title: P () Delete Title: Name: DEVLIN, LARRY Name: Address: 3612 SW 3RD AVE Address: City-St-Zip: CAPE CORAL, FL 33914 City-St-Zip: Title: SEC () Delete Title: Name: MERRIAM, KUSHNER Name: Address: 7571 WINGED FOOT CIRCLE Address: City-St-Zip: FORT MYERS, FL 33967 City-St-Zip: Title: TRES () Delete Title: Name: GRAHAM, KEVIN Name: Address: 18419 CAMELLIA RD Address: City-St-Zip: FORT MYERS, FL 33967 City-St-Zip: Title: DIR () Delete Title: Name: CORDELL, WALLY Name: Address: 8144 NEW JERSEY BLVD Address: City-St-Zip: FORT MYERS, FL 33967 City-St-Zip: Title: DIR () Delete Title: | Date |
| Name: DEVLIN, LARRY Name: Address: 3612 SW 3RD AVE Address: City-St-Zip: CAPE CORAL, FL 33914 City-St-Zip: Title: SEC () Delete Title: Name: MERRIAM, KUSHNER Name: Address: 7571 WINGED FOOT CIRCLE Address: City-St-Zip: FORT MYERS, FL 33967 City-St-Zip: Title: TRES () Delete Title: Name: GRAHAM, KEVIN Name: Address: 18419 CAMELLIA RD Address: City-St-Zip: FORT MYERS, FL 33967 City-St-Zip: Title: DIR () Delete Title: Name: CORDELL, WALLY Name: Address: 8144 NEW JERSEY BLVD Address: City-St-Zip: FORT MYERS, FL 33967 City-St-Zip: Title: DIR () Delete Title: | NS/CHANGES TO OFFICERS AND DIRECTORS |
| Name: MERRIAM, KÜSHNER Name: Address: 7571 WINGED FOOT CIRCLE Address: City-St-Zip: FORT MYERS, FL 33967 City-St-Zip: Title: TRES () Delete Title: Name: GRAHAM, KEVIN Name: Address: 18419 CAMELLIA RD Address: City-St-Zip: FORT MYERS, FL 33967 City-St-Zip: Title: DIR () Delete Title: Name: CORDELL, WALLY Name: Address: 8144 NEW JERSEY BLVD Address: City-St-Zip: FORT MYERS, FL 33967 City-St-Zip: Title: DIR () Delete Title: | ()Change ()Addition |
| Name: GRAHAM, KEVÍN Name: Address: 18419 CAMELLIA RD Address: City-St-Zip: FORT MYERS, FL 33967 City-St-Zip: Title: DIR () Delete Title: Name: CORDELL, WALLY Name: Address: 8144 NEW JERSEY BLVD Address: City-St-Zip: FORT MYERS, FL 33967 City-St-Zip: Title: DIR () Delete Title: | ()Change ()Addition |
| Name: CORDELL, WALLY Name: Address: 8144 NEW JERSEY BLVD Address: City-St-Zip: FORT MYERS, FL 33967 City-St-Zip: Title: DIR () Delete Title: | ()Change ()Addition |
| () | () Change () Addition |
| Address: 14571 LAKE OLIVE DRIVE Address: City-St-Zip: FORT MYERS, FL 33913 City-St-Zip: | ()Change ()Addition |
| Title: DIR () Delete Title: Name: MATHEWS, MCCLURE Name: Address: 12828 DORNOCH CT Address: City-St-Zip: FORT MYERS, FL 33912 City-St-Zip: | ()Change ()Addition |

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: KEVIN GRAHAM TRES 04/30/2009