

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N10000007287

FILED  
Jan 30, 2012  
Secretary of State

**Entity Name:** KIWANIS CLUB OF LARGO/MID-PINELLAS FOUNDATION, INC.

**Current Principal Place of Business:**

200 LAKE AVENUE, NE  
LARGO, FL 33771

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 2043  
LARGO, FL 337792043

**New Mailing Address:**

**FEI Number:** 90-0599760      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired (X)**

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

BENNETT, REGINA C  
1891 C DREW ST  
CLEARWATER, FL 33765      US

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

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**OFFICERS AND DIRECTORS:**

Title: P  
Name: JENSON, ELLEN K  
Address: 200 LAKE AVE #128 A  
City-St-Zip: LARGO, FL 33771

Title: PE  
Name: HOGAN, BENJAMIN  
Address: 200 LAKE AVE #531  
City-St-Zip: LARGO, FL 33771

Title: S  
Name: TAPHOUSE, DEBBIE  
Address: 2136 PINE RIDGE DR  
City-St-Zip: CLEARWATER, FL 33763

Title: T  
Name: BLACK, MARY G  
Address: 1860 HARMONY DR  
City-St-Zip: CLEARWATER, FL 33756

Title: D  
Name: HALVORSEN, JEAN  
Address: 79 ROYAL PALM CIRCLE  
City-St-Zip: LARGO, FL 33778

Title: D  
Name: THOMPSON, THOMAS  
Address: 2199 NOLAN DRIVE S  
City-St-Zip: LARGO, FL 33770

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: MARY G. BLACK

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01/30/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date