

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N10258

FILED  
Jan 24, 2007  
Secretary of State

Entity Name: KIWANIS CLUB OF THE PLAYGROUND AREA, INC.

## Current Principal Place of Business:

208 FLIVA AVE  
FORT WALTON BEACH, FL 32548 US

## New Principal Place of Business:

945-F ASHLEY LANE  
FORT WALTON BEACH, FL 32547 US

## Current Mailing Address:

PO BOX 507  
SHALIMAR, FL 32579 US

## New Mailing Address:

FEI Number: 59-6569622      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

BARTS, DUANE  
208 FLIVA AVE  
FORT WALTON BEACH, FL 32548 US

## Name and Address of New Registered Agent:

STEWART, TOM  
945-F ASHLEY LANE  
FORT WALTON BEACH, FL 32547 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: TOM STEWART

01/24/2007

Electronic Signature of Registered Agent

Date

## OFFICERS AND DIRECTORS:

Title: SD ( ) Delete  
Name: BARTS, DUANE  
Address: 208 FLIVA AVE  
City-St-Zip: FORT WALTON BEACH, FL 32548

Title: PD ( ) Delete  
Name: BURTON, BOB  
Address: 360 BRIAN CIR  
City-St-Zip: MARY ESTHER, FL 32569

Title: D ( ) Delete  
Name: DODD, DONNIE  
Address: 713 OVER BROOK  
City-St-Zip: FORT WALTON BEACH, FL 32547

Title: D ( ) Delete  
Name: TEW, RANDY  
Address: 271 BRIAN CIRCLE  
City-St-Zip: MARY ESTHER, FL 32569

Title: D ( ) Delete  
Name: STEWART, TOM  
Address: 945 F ASHLEY LANE  
City-St-Zip: FORT WALTON BEACH, FL 32547

Title: VD ( ) Delete  
Name: CONDE, EMILY  
Address: 919 HOLBROOK CIR  
City-St-Zip: FORT WALTON BEACH, FL 32547

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: TD (X) Change ( ) Addition  
Name: HORN, PAUL D  
Address: 617 CAMBRIDGE AVE NE  
City-St-Zip: FORT WALTON BEACH, FL 325471839 US

Title: D (X) Change ( ) Addition  
Name: BURTON, BOB  
Address: 360 BRIAN CIR  
City-St-Zip: MARY ESTHER, FL 32569

Title: VD (X) Change ( ) Addition  
Name: ROLAND, CHUCK  
Address: 435 GREEN ACRES ROAD  
City-St-Zip: FORT WALTON BEACH, FL 32547

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: SD (X) Change ( ) Addition  
Name: STEWART, TOM  
Address: 945-F ASHLEY LANE  
City-St-Zip: FORT WALTON BEACH, FL 32547

Title: PD (X) Change ( ) Addition  
Name: CONDE, EMILY  
Address: 919 HOLBROOK CIR  
City-St-Zip: FORT WALTON BEACH, FL 32547

I hereby certify that the information supplied with this filing does not qualify for the 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: PAUL D HORN

TD

01/24/2007

Electronic Signature of Signing Officer or Director

Date