'2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 10, 2006 8:00 am
Secretary of State
02-10-2006 90028 007 ****61.25

DOCUMENT # N16572

1. Entity Name
KIWANIS CLUB OF NAPLES EAST, INCORPORATED

Principal Place of Business	Mailing Address
4335 TAMIAMI TR E NAPLES, FL 34112 US	P.O. BOX 572 NAPLES, FL 34106-0572 US

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

01272006 Chg-NP CR2E037 (11/05)

4. FEI Number 65-0069743 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
SEAMPLES, MARCI 5762 LAGO VILLAGGIO WAY – CAROL M CORAH NAPLES, FL 34104 18 NAVAJO TR. NAPLES, FL 34113	Name Street Address (P.O. Box Number is Not Acceptable) City **FL** Zip Code

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 Carol M. Corah 2/7/06
Signature, typed or printed name of registered agent and title, if applicable. (NOTE: Registered Agent signature required when changing) DATE

Filing Fee is $61.25
Due by May 1, 2006

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			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE / NAME / STREET ADDRESS / CITY ST ZIP	P FRIES, CAROL 4580 EAGLE KEY CIRCLE NAPLES, FL 34112	☒ Delete	TITLE P NAME STREET ADDRESS CITY ST ZIP	JEFFERY MACASEVICH 3823 TAMIAMI TR. EAST #119 NAPLES, FL 34112-6224	☒ Change ☐ Add'l on
TITLE / NAME / STREET ADDRESS / CITY ST ZIP	SD LEE-ADAMS, SALLY 6600 BEACH RESORT DR #1 NAPLES, FL 34114	☐ Delete	TITLE SD NAME STREET ADDRESS CITY ST ZIP	SAME	☐ Change ☐ Add'l on
TITLE / NAME / STREET ADDRESS / CITY ST ZIP	T SEAMPLES, MARCI 5762 LAGO VILLAGGIO WAY NAPLES, FL 34104	☐ Delete	TITLE T NAME STREET ADDRESS CITY ST ZIP	CAROL M. CORAH 18 NAVAJO TR. NAPLES, FL. 34113	☒ Change ☐ Add'l on
TITLE / NAME / STREET ADDRESS / CITY ST ZIP	V MACASEVICH, JEFF 3823 TAMIAMI TRAIL E #119 NAPLES, FL 34112	☒ Delete	TITLE V NAME STREET ADDRESS CITY ST ZIP	PAUL ADAMS 6600 BEACH RESORT DR #1 NAPLES, FL. 34114	☒ Change ☐ Add'l on
TITLE / NAME / STREET ADDRESS / CITY ST ZIP	BM KINGTON, BUDDY 5170 BERKLEY DRIVE NAPLES, FL 34104	☐ Delete	TITLE NAME STREET ADDRESS CITY ST ZIP	SAME	☐ Change ☐ Add'l on
TITLE / NAME / STREET ADDRESS / CITY ST ZIP	BM ADAMS, PAUL 6600 BEACH RESORT DR #1 NAPLES, FL 34114	☒ Delete	TITLE NAME STREET ADDRESS CITY ST ZIP	ROSALIE RHODES 4260 JACK FROST CT. NAPLES, FL. 34112	☒ Change ☐ Add'l on

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: Carol M. Corah 2/7/06
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date