

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 05, 2006 8:00 am
Secretary of State

05-05-2006 90181 027 ****61.25

DOCUMENT # N18150 1. Entity Name KIWANIS CLUB OF WILDWOOD, FLORIDA, INC.			
* Principal Place of Business P.O. BOX 40 WILDWOOD, FL 34785		Mailing Address P.O. BOX 40 WILDWOOD, FL 34785	
2. Principal Place of Business <i>Meeting Place</i> Coffee House Wildwood, FL		3. Mailing Address P.O. Box 40 Wildwood, FL	
Suite, Apt. #, etc. Wildwood, FL		Suite, Apt. #, etc. Wildwood, FL	
City & State Wildwood, FL		City & State Wildwood, FL	
Zip 34785		Zip 34785	
Country USA		Country USA	
4. FEI Number NOT APPLICABLE		Applied For Not Applicable	
5. Certificate of Status Desired ☐		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent COUILLARD, DIANE 609 N. OLD WIRE ROAD WILDWOOD, FL 34785		7. Name and Address of New Registered Agent 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 _____ (NOTE: Registered Agent signature required when reappointing) DATE _____			
Filing Fee is \$81.25 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 VP President	NAME NICHOLS, THERM	TITLE VP President	NAME NICHOLS, THERM
STREET ADDRESS 3532 WRIGHTLING WAY	CITY - ST - ZIP MIAMI, FL 33182	STREET ADDRESS 3532 WRIGHTLING WAY	CITY - ST - ZIP MIAMI, FL 33182
TITLE Board member	NAME ROCKER, RODNEY	TITLE Board member	NAME ROCKER, RODNEY
STREET ADDRESS P.O. BOX 623	CITY - ST - ZIP WILDWOOD, FL 34785	STREET ADDRESS P.O. BOX 623	CITY - ST - ZIP WILDWOOD, FL 34785
TITLE Treasurer	NAME ROCKCASTLE, RUTH	TITLE Treasurer	NAME ROCKCASTLE, RUTH
STREET ADDRESS 3372 CR 204	CITY - ST - ZIP WILDWOOD, FL 34785	STREET ADDRESS 3372 CR 204	CITY - ST - ZIP WILDWOOD, FL 34785
TITLE Secretary	NAME ROCKCASTLE, RUTH	TITLE Secretary	NAME ROCKCASTLE, RUTH
STREET ADDRESS 3372 CR 204	CITY - ST - ZIP OXFORD, FL 34484	STREET ADDRESS 3372 CR 204	CITY - ST - ZIP OXFORD, FL 34484
TITLE Sarah Royal	NAME 1200 Street	TITLE Sarah Royal	NAME 1200 Street
STREET ADDRESS Wildwood, FL 34785	CITY - ST - ZIP Wildwood, FL 34785	STREET ADDRESS Wildwood, FL 34785	CITY - ST - ZIP Wildwood, FL 34785
TITLE VP	NAME Sarah Royal	TITLE VP	NAME Sarah Royal
STREET ADDRESS 1200 Street	CITY - ST - ZIP Wildwood, FL 34785	STREET ADDRESS 1200 Street	CITY - ST - ZIP Wildwood, FL 34785
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: Ruth Rockcastle		Date: 4/28/06	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Daytime Phone #	