

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Apr 03, 2006 8:00 am**  
**Secretary of State**

04-03-2006 90362 004 \*\*\*\*61.25

**DOCUMENT # N18931**

1. Entity Name  
**KIWANIS CLUB OF ANNA MARIA ISLAND, INC.**



Principal Place of Business  
**PO BOX 1215  
HOMES BEACH, FL 34217 US**

Mailing Address  
**P.O. BOX 1215  
HOLMES BEACH, FL 34217 US**



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

01072006 Chg-NP CR2E037 (11/05)

City & State

City & State

4. FEI Number  
**59-1056541**

Applied For  
Not Applicable

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

Zip  
**34218-1215**

Country

Zip  
**34218-1215**

Country

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**BOHNENBERGER, RICHARD  
234 85TH ST  
HOLMES BEACH, FL 34217**

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

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 **TD** ☐ Delete  
NAME **CORY, LARRY**  
STREET ADDRESS **3038 BAY OAKS DR**  
CITY-ST-ZIP **SARASOTA, FL 34234**

TITLE **C** ☒ Change ☐ Addition  
NAME **BASSETT, RALPH**  
STREET ADDRESS **11208 NERANDA COURT**  
CITY-ST-ZIP **BRADENTON, FL 34209**

TITLE **D** ☐ Delete  
NAME **LOPICCOLO, ROBERT C.**  
STREET ADDRESS **3854 CATALINA DR.**  
CITY-ST-ZIP **BRADENTON, FL**

TITLE **D** ☒ Change ☐ Addition  
NAME **BOHNENBERGER, PHYLIS**  
STREET ADDRESS **234 85TH STREET**  
CITY-ST-ZIP **BRADENTON BEACH, FL 34217**

TITLE **P** ☒ Delete  
NAME **BASSETT, RALPH**  
STREET ADDRESS **11208 NERANDA COURT**  
CITY-ST-ZIP **BRADENTON, FL 34209**

TITLE **P** ☐ Change ☒ Addition  
NAME **ALLAN GUY**  
STREET ADDRESS **6500 FLOTILLA DR. UNIT 186**  
CITY-ST-ZIP **HOLMES BEACH, FL 34217**

TITLE **D** ☐ Delete  
NAME **OLSON, RUSSELLA**  
STREET ADDRESS **6200 FLOTILLA DR. #262**  
CITY-ST-ZIP **HOLMES BEACH, FL**

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE **C** ☒ Delete  
NAME **BOHNENBERGER, PHYLIS**  
STREET ADDRESS **234 85TH STREET**  
CITY-ST-ZIP **BRADENTON BEACH, FL 34217**

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE **S** ☐ Delete  
NAME **BOHNEBERGER, RICHARD**  
STREET ADDRESS **234 85TH STREET**  
CITY-ST-ZIP **HOLMES BEACH, FL**

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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: *LARRY CORY* **LARRY CORY**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**1/29/06** **941-302-2188**  
Date Daytime Phone #