2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 04, 2009
Secretary of State

DOCUMENT# N28222

Entity Name: KIWANIS CLUB OF THE CITRUS CENTER FOUNDATION, INC.

Current Principal Place of Business:

2222 CAMBRIDGE AVE.
LAKELAND, FL 33803 US

New Principal Place of Business:

Current Mailing Address:

P O BOX 8954
LAKELAND, FL 33806 US

New Mailing Address:

FEI Number: 59-2907041 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

HART, TIM J
614 PALMORE CT
LAKELAND, FL 33813 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: TD ( ) Delete
Name: SELLERS, RICHARD L
Address: 2222 CAMBRIDGE AVE.
City-St-Zip: LAKELAND, FL 33803

Title: VPD ( ) Delete
Name: HINES, ERIC D
Address: 3370 HIGHLANDS FAIRWAYS
City-St-Zip: LAKELAND, FL 33810

Title: D ( ) Delete
Name: KNOWLES, REBECCA
Address: P O BOX 8842
City-St-Zip: LAKELAND, FL 33806

Title: PD ( ) Delete
Name: KNOWLES, BRIAN
Address: P O BOX 8842
City-St-Zip: LAKELAND, FL 33806

Title: SD ( ) Delete
Name: GREEN, JACKIE
Address: 1400 GRASSLANDS BLVD APT 43
City-St-Zip: LAKELAND, FL 33803

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: PD (X) Change ( ) Addition
Name: HINES, ERIC D
Address: 3370 HIGHLANDS FAIRWAYS
City-St-Zip: LAKELAND, FL 33810

Title: D (X) Change ( ) Addition
Name: BAROODY, TOM
Address: P O BOX 8842
City-St-Zip: LAKELAND, FL 33806

Title: D (X) Change ( ) Addition
Name: KNOWLES, BRIAN
Address: P O BOX 8842
City-St-Zip: LAKELAND, FL 33806

Title: SD (X) Change ( ) Addition
Name: SHORT, JACKIE
Address: 2022 DEERFIELD DRIVE
City-St-Zip: LAKELAND, FL 33813

I hereby certify that the information supplied with this filing does not qualify 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: RICHARD L. SELLERS TD 02/04/2009

Electronic Signature of Signing Officer or Director — Date