

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N32607

FILED
Feb 17, 2004
Secretary of State**Entity Name:** THE KIWANIS CLUB OF JACKSONVILLE CHARITABLE FOUNDATION, INC.**Current Principal Place of Business:**1130 HOLLY LANE
JACKSONVILLE, FL 32207 US**New Principal Place of Business:****Current Mailing Address:**1130 HOLLY LANE
JACKSONVILLE, FL 32207 US**New Mailing Address:****FEI Number:** 59-2951722 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()****Name and Address of Current Registered Agent:**PATTERSON, BOND & LATSHAW
3010 S. 3RD ST.
JACKSONVILLE BEACH, FL 32250**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:** SD () Delete
Name: LEFEVRE, RANDE
Address: 1130 HOLLY LANE
City-St-Zip: JACKSONVILLE, FL 32207**Title:** VD () Delete
Name: POSTER, DAVID
Address: 8880 FREEDOM CROSSING TRL STE 103
City-St-Zip: JACKSONVILLE, FL 32256**Title:** PD () Delete
Name: MACLENNAN, JOHN
Address: P.O. BOX 53315
City-St-Zip: JACKSONVILLE, FL 32201**Title:** TD () Delete
Name: COLLINS, MICHAEL
Address: 4655 SALISBURY RD
City-St-Zip: JACKSONVILLE, FL**Title:** VD () Delete
Name: GULLION, PHILLIP
Address: 6004 BOWDENDALE AVE
City-St-Zip: JACKSONVILLE, FL 32216**Title:** PD () Delete
Name: JARELL, MARTIN
Address: 12290 DERNER LANE
City-St-Zip: JACKSONVILLE, FL 32205**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:****Title:** () Change () Addition
Name:
Address:
City-St-Zip:**Title:** () Change () Addition
Name:
Address:
City-St-Zip:**Title:** () Change () Addition
Name:
Address:
City-St-Zip:**Title:** () Change () Addition
Name:
Address:
City-St-Zip:**Title:** () Change () Addition
Name:
Address:
City-St-Zip:**Title:** VD (X) Change () Addition
Name: TAPPAN, GLENN
Address: PO BOX 41564
City-St-Zip: JACKSONVILLE, FL 32203

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: RANDE M. LE FEVRE

SD

02/17/2004

Electronic Signature of Signing Officer or Director

Date