

# **2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N34531

**FILED**  
**Feb 26, 2010**  
**Secretary of State**

**Entity Name:** KIWANIS CLUB OF LEHIGH ACRES FOUNDATION, INC.

**Current Principal Place of Business:**

15 S HOMESTEAD RD  
LEHIGH ACRES, FL 33936 US

**New Principal Place of Business:**

**Current Mailing Address:**

15 S HOMESTEAD RD  
LEHIGH ACRES, FL 33936 US

**New Mailing Address:**

**FEI Number:** 65-0208391

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

**Name and Address of Current Registered Agent:**

BRENDA FALLON  
269 JUSTENE CIRCLE  
LEHIGH ACRES, FL 33936 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:** PP  
**Name:** FALLON, BRENDA  
**Address:** 269 JUSTENE CIR  
**City-St-Zip:** LEHIGH ACRES, FL 33936

**Title:** P  
**Name:** SHELOR, DAMON  
**Address:** 211 JACKSON AVE  
**City-St-Zip:** LEHIGH ACRES, FL 33972

**Title:** PE  
**Name:** RAKUNAS, CHRIS  
**Address:** 1500 LEE BLVD  
**City-St-Zip:** LEHIGH ACRES, FL 33936

**Title:** T  
**Name:** DIERKS, WALTER  
**Address:** 110 STAFFORD PL  
**City-St-Zip:** LEHIGH ACRES, FL 33936

**Title:** S  
**Name:** BAKER, WILLARD  
**Address:** 609 NORTH AVE  
**City-St-Zip:** LEHIGH ACRES, FL 33936

I hereby 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 all other like empowered.

**SIGNATURE:** BRENDA FALLON

MS

02/26/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date