

# 2008 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N35761

FILED  
Oct 31, 2008  
Secretary of State

**Entity Name:** ROTARY CLUB OF KISSIMMEE WEST, INC.

**Current Principal Place of Business:**

P.O. BOX 423218  
KISSIMMEE, FL 347420218

**New Principal Place of Business:**

13574 VILLAGE PARK DR  
255  
ORLANDO, FL 32837

**Current Mailing Address:**

P.O. BOX 423218  
KISSIMMEE, FL 347420218

**New Mailing Address:**

**FEI Number:** 59-2592366      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

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

SMALLWOOD, DONALD T  
206 SOUTH BEAUMONT AVENUE  
KISSIMMEE, FL 34743 US

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

KOTWAL, SHYAM T  
13574 VILLAGE PARK DR  
255  
ORLANDO, FL 32837 US

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: SHYAM KOTWAL

10/31/2008

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: D ( ) Delete  
Name: KOTWAL, SHYAM  
Address: 1555 HARRIER DR  
City-St-Zip: ORLANDO, FL 32837

Title: PD ( ) Delete  
Name: NEWMAN, LAWRENCE V  
Address: 14613 HEATHERMERE LANE  
City-St-Zip: ORLANDO, FL 32837

Title: SD ( ) Delete  
Name: MILES, SHEILA  
Address: 4503 LAKE CALABAY DR  
City-St-Zip: ORLANDO, FL 32837

Title: PE ( ) Delete  
Name: WOESSNER, GREG  
Address: 2500 GRANADA  
City-St-Zip: KISSIMMEE, FL 34746

Title: TE (X) Delete  
Name: BENCA, CONNIE  
Address: 3813 BLACKBERRY CIRCLE  
City-St-Zip: ST. CLOUD, FL 34769

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: TR (X) Change ( ) Addition  
Name: KOTWAL, SHYAM  
Address: 1555 HARRIER DR  
City-St-Zip: ORLANDO, FL 32837

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

Title: SD (X) Change ( ) Addition  
Name: MILES, IAN  
Address: 4503 LAKE CALABAY DR  
City-St-Zip: ORLANDO, FL 32837

Title: DR (X) Change ( ) Addition  
Name: BENCA, CONNIE  
Address: 3813 BLACKBERRY CIRCLE  
City-St-Zip: ST. CLOUD, FL 34769

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

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: LARRY NEWMAN

PD

10/31/2008

Electronic Signature of Signing Officer or Director

Date