

# **2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N37272

**FILED**  
**Jan 05, 2011**  
**Secretary of State**

**Entity Name:** LAKE WALES KIWANIS FOUNDATION, INC.

**Current Principal Place of Business:**

101 E. PARK AVE  
LAKE WALES, FL 33859

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 1037  
LAKE WALES, FL 33859

**New Mailing Address:**

**FEI Number:** 59-3061920

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

SPENCE, DEANNA C  
957 OLD CUTLER RD  
LAKE WALES, FL 33898 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: S  
Name: SPENCE, DEANNA C  
Address: 957 OLD CUTLER ROAD  
City-St-Zip: WINTER HAVEN, FL 33898

Title: TD  
Name: TONJES, LARRY L  
Address: 3648 TWISTED OAK COURT  
City-St-Zip: LAKE WALES, FL 33853

Title: P  
Name: ROB, OAKMAN  
Address: 1021 SUNSET DR.  
City-St-Zip: LAKE WALES, FL 33853

Title: PP  
Name: NATHANS, RICHARD  
Address: 512 11TH STREET S.  
City-St-Zip: LAKE WALES, FL 33853

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: LARRY TONJES

TREA

01/05/2011

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

\_\_\_\_\_  
Date