

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N38401

FILED
Mar 15, 2011
Secretary of State

Entity Name: KIWANIS CLUB OF CENTRAL FLORIDA (SEMINOLE COUNTY) CHARITIES,INC.

Current Principal Place of Business:

820 LAKE KATHRYN CR
CASSELBERRY, FL 32707 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 160321
ALTAMONTE SPRINGS, FL 327160321 US

New Mailing Address:

FEI Number: 59-3075649

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

H. W. BILL HEWSON, SEC.
584 WHISPER WOOD DR
LONGWOOD, FL 32779 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: TS
Name: SCHNELL, JAMES
Address: 645 SWEET BRIAR BRANCH
City-St-Zip: LONGWOOD, FL 32750 US

Title: DP
Name: FINCH, WILLIAM
Address: 826 AYDEN OAK AVE
City-St-Zip: WINTER PARKOCOE, FL 34761 US

Title: D
Name: WEST, LUCY
Address: 588 SAND WEDGE LOOP
City-St-Zip: APOPKA, FL 32712 US

Title: D
Name: CROWDER, DAVID C
Address: 820 LAKE KATHRYN CR
City-St-Zip: CASSELBERRY, FL 32707 US

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: DAVID C CROWDER

TRES

03/15/2011

Electronic Signature of Signing Officer or Director

Date