2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N42746

FILED Mar 02, 2008 Secretary of State

Entity Name: CAPITAL CITY KIWANIS CLUB FOUNDATION, INC.

Current Principal Place of Business:			New Prince	New Principal Place of Business:		
300 TIME	TT P ANDERSON BERLANE ROAD SSEE, FL 32312					
Current Mailing Address:			New Maili	New Mailing Address:		
300 TIME	TT P ANDERSON BERLANE ROAD SSEE, FL 32312					
El Number	:: 59-3109894 FE	El Number Applied For()	FEI Number Not App	Certificate of Status Desire	d ()	
lame and	d Address of Curre	ent Registered Agent:	Name and	Address of New Registered Agent:		
300 TIME	ON, EVERETT P BERLANE ROAD SSEE, FL 32312	US				
	e named entity subn e of Florida.	nits this statement for the p	ourpose of changing i	its registered office or registered agent,	or both,	
SIGNATU	RE:					
	Electronic S	ignature of Registered Age	ent	Date		
OFFICERS AND DIRECTORS:			ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTOR		
itle: lame: ddress: city-St-Zip:	P () Dele SPALDING, LARRY 2256 COBB DRIVE TALLAHASSEE, FL		Title: Name: Address: City-St-Zip:	()Change ()Addition		
itle: lame: ddress: ty-St-Zip:	D () Dele WYLIE, JIM 5359 PEMBRIDGE F TALLAHASSEE, FL	PLACE	Title: Name: Address: City-St-Zip:	VP (X) Change () Addition WYLIE, JIM 5359 PEMBRIDGE PLACE TALLAHASSEE, FL 32308		
ïtle:	D () Dele	J JR	Title: Name:	() Change () Addition		
lame: .ddress:	711 EAST SIXTH AV TALLAHASSEE, FL		Address: City-St-Zip:			
lame: laddress: city-St-Zip: citle: lame: lame: cddress: city-St-Zip:	711 EAST SIXTH AV	32303 ete 2D	Address:	()Change ()Addition		
lame: ddress: city-St-Zip: itle: lame: ddress:	711 EAST SIXTH AV TALLAHASSEE, FL D () Dele EISENMAN, HOWAR 3105 AVON CIRCLE	32303 ete 323122424 ete ERT K	Address: City-St-Zip: Title: Name: Address:	() Change () Addition ST (X) Change () Addition HENDERSON, ROBERT K 497 STONE HOUSE RD TALLAHASSEE, FL 323013357		

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: ROBERT K. HENDERSON ST 03/02/2008