

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N47226

FILED
Apr 22, 2009
Secretary of State

Entity Name: KIWANIS CLUB OF ORLANDO, INC.

Current Principal Place of Business:

626 LAKE DOT CIRCLE
ORLANDO, FL 32801

New Principal Place of Business:

Current Mailing Address:

626 LAKE DOT CIRCLE
ORLANDO, FL 32801

New Mailing Address:

FEI Number: 51-0203854

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HEBERT, ANDREW
626 LAKE DOT CIRCLE
ORLANDO, FL 32801 US

Name and Address of New Registered Agent:

WEST, MATTHEW
605 E. ROBINSON STREET
SUITE 320
ORLANDO, FL 32801 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: MATTHEW WEST

04/22/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: DINON, STEPHEN
Address: 1700 GARVIN STREET
City-St-Zip: ORLANDO, FL 32803

Title: VPD () Delete
Name: WEST, MATT
Address: 797 N ORANGE AVE
City-St-Zip: ORLANDO, FL 32801

Title: VPD () Delete
Name: DINON, STEPHEN
Address: 1414 KUHL AVENUE
City-St-Zip: ORLANDO, FL 32806

Title: TD () Delete
Name: HEBERT, ANDREW
Address: 201 E PINE STREET SUITE 250
City-St-Zip: ORLANDO, FL 32801

Title: SD () Delete
Name: MURDOCK, JACK
Address: 124 CHANNEL DRIVE
City-St-Zip: LAKE MARY, FL 32765

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: WEST, MATTHEW
Address: 605 E. ROBINSON STREET, SUITE 320
City-St-Zip: ORLANDO, FL 32801

Title: VPD (X) Change () Addition
Name: PORTER, TOM
Address: 626 LAKE DOT CIRCLE
City-St-Zip: ORLANDO, FL 32801

Title: VPD (X) Change () Addition
Name: TEAGUE, KELLEY
Address: 626 LAKE DOT CIRCLE
City-St-Zip: ORLANDO, FL 32801

Title: TD (X) Change () Addition
Name: WANZENBERG, CHRIS
Address: 626 LAKE DOT CIRCLE
City-St-Zip: ORLANDO, FL 32801

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: MATTHEW WEST

PD

04/22/2009

Electronic Signature of Signing Officer or Director

Date