2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N48707

Jul 11, 2006 Secretary of State

Entity Name: KIWANIS CLUB OF NORTH ORLANDO, INC.

Current Principal Place of Business: New Principal Place of Business:

646 W SMITH STREET 800 E. WASHINGTON STREET ORLANDO, FL 32804 ORLANDO, FL 32801 US

Current Mailing Address: New Mailing Address:

PO BOX 641

ORLANDO, FL 32802

FEI Number: 59-6158827 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: Name and Address of New Registered Agent:

SEKAC, MARY F 757 LITTLE WEKIVA CIRCLE ALTAMONTE SPRINGS, FL 32714 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:

Date

Electronic Signature of Registered Agent

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change () Addition () Delete PUGH, IRBY LUEBBERT, RICKY Name: Name: 218 ANNIE STREET Address: 6014 SCOTS PINE CT Address: City-St-Zip: ORLANDO, FL 32806 City-St-Zip: ORLANDO, FL 32819

Title: Title: (X) Change () Addition () Delete LUEBBERT, RICK Name: BARR, JR, PETE Name: Address: 1021 E LIVINGSTON ST Address: 600 E WASHINGTON ST

City-St-Zip: ORLANDO, FL 32803 City-St-Zip: ORLANDO, FL 32801

() Delete Title: Title: () Change () Addition

DAVIS, KAY Name: Name: 3058 GREENMOUNT RD Address: Address: City-St-Zip: ORLANDO, FL 32806 City-St-Zip:

() Delete Title: Title: SD (X) Change () Addition

SEKAC, MARY Name: Name: SEKAC, MARY 757 LITTLE WEKIVA CIR 757 LITTLE WEKIVA CIR Address: Address:

City-St-Zip: ALTAMONTE SPRINGS, FL 32714 City-St-Zip: ALTAMONTE SPRINGS, FL 32714

Title: () Delete Title: (X) Change () Addition

HOLLAND, DAVID RIGBY, BARRY Name: Name: 601 N FERNCREEK #200 5205 S ORANGE AVE Address: Address: ORLANDO, FL 32809 City-St-Zip: ORLANDO, FL 32803 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: MARY F. SEKAC SD 07/11/2006