2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N48707

FILED May 12, 2008 Secretary of State

Entity Name: KIWANIS CLUB OF NORTH ORLANDO, INC.

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

600 E. WASHINGTON STREET 924 N. MAGNOLIA AVE STE 319 ORLANDO, FL 32801 ORLANDO, FL 32803

Current Mailing Address: New Mailing Address:

PO BOX 641 PO BOX 641

ORLANDO, FL 32802 ORLANDO, FL 32804

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 LUEBBERT, RICKY ILVENTO, LAUREN Name: Name: 6014 SCOTS PINE CT Address: PO BOX 547082 Address: ORLANDO, FL 32854 City-St-Zip: ORLANDO, FL 32819 City-St-Zip:

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

BARR, JR, PETE Name: BARR, JR, PETE Name: Address: 600 E WASHINGTON ST Address: 600 E WASHINGTON ST City-St-Zip: ORLANDO, FL 32801 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: SD Title: () Change () Addition

Name: SEKAC, MARY Name: 757 LITTLE WEKIVA CIR Address: Address: City-St-Zip: ALTAMONTE SPRINGS, FL 32714 City-St-Zip:

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

RIGBY, BARRY RIGBY, BARRY Name: Name:

5205 S ORANGE AVE 924 N. MAGNOLIA AVE STE 319 Address: Address:

City-St-Zip: ORLANDO, FL 32809 City-St-Zip: ORLANDO, FL 32804

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: MARY F. SEKAC SD 05/12/2008