## 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N50158

FILED Jan 09, 2007 Secretary of State

Entity Name: KIWANIS CLUB OF SOUTH LAKE, CLERMONT, INC.

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

2601 DIAMOND CLUB DRIVE CLERMONT, FL 34711

**Current Mailing Address: New Mailing Address:** 

POST OFFICE BOX 120063 CLERMONT, FL 34712

FEI Number: 59-2670130 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

TRIBBLE, GRANT 200 BAKÉR STREET CLERMONT, FL 34718 US

**OFFICERS AND DIRECTORS:** 

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

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change ( ) Addition () Delete

GLEEN, IRBY MCCOY, LINDA Name: Name: 445 RICHMONT CT. Address: 194 N HWY 27 Address: City-St-Zip: CLERMONT, FL 34711 City-St-Zip: CLERMONT, FL 34711

Title: Title: (X) Change ( ) Addition ( ) Delete MCCOY, LINDA Name: BUCHER, MIKE Name:

Address: 2251 CLIPSTONE CT. Address: 1510 E HWY 50 City-St-Zip: CLEMONT, FL 34711 City-St-Zip: CLEMONT, FL 34711

Title: () Delete Title: (X) Change ( ) Addition HAGE, LUZ M MCCARTER, RACHEL Name: Name:

Address: 21115 CR 455 Address: 1460 E HWY 50 City-St-Zip: CLERMONT, FL 34711 City-St-Zip: CLERMONT, FL 34711

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

Name: SHEETS, LINDA Name: Address: 12942 C.R. 561 Address: City-St-Zip: CLERMONT, FL 34711 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: RACHEL MCCARTER SEC 01/09/2007