

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N93000004625

FILED
Jan 19, 2007
Secretary of State

Entity Name: KIWANIS CLUB OF LAKE LAND, FLORIDA, INC.

Current Principal Place of Business:

C/O JOY DAVIS
1718 SIMS PL
LAKE LAND, FL 33803

New Principal Place of Business:

Current Mailing Address:

PO BOX 5146
LAKE LAND, FL 338075146

New Mailing Address:

FEI Number: 59-0683705

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RISHAM, DAVID G
P.O. BOX 2426
225 E. LEMON ST.,
LAKE LAND, FL 33802 US

Name and Address of New Registered Agent:

GRISHAM, DAVID
PETERSON & MYERS/1401 S. FLORIDA AVE.
LAKE LAND, FL 33801 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: DAVID GRISHAM

01/19/2007

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PPD () Delete
Name: WALLER, ROBERT J
Address: 2733 EASTON TERRACE
City-St-Zip: LAKE LAND, FL 33803

Title: VP () Delete
Name: WEGMAN, PHIL
Address: 625 E. ORANGE ST.
City-St-Zip: LAKE LAND, FL 33801

Title: T () Delete
Name: ALTMAN, JAMES BRIAN
Address: 210 S. FLORIDA AVE., 2ND FLOOR
City-St-Zip: LAKE LAND, FL 33802

Title: SD () Delete
Name: DAVIS, JOY B
Address: 1718 SIMS PL.
City-St-Zip: LAKE LAND, FL 33803

Title: VP (X) Delete
Name: ELMHORST, KURT
Address: 1401 S. FLORIDA AVE.
City-St-Zip: LAKE LAND, FL 33803

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change () Addition
Name: ELMHORST, KURT F
Address: 1401 S. FLORIDA AVE.
City-St-Zip: LAKE LAND, FL 33803

Title: VP (X) Change () Addition
Name: MCKNIGHT, KARIN
Address: 1401 S. FLORIDA AVE.
City-St-Zip: LAKE LAND, FL 33803

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
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: JOY B DAVIS

SD

01/19/2007

Electronic Signature of Signing Officer or Director

Date