

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N93000004625

FILED
Mar 23, 2009
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:

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

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PRES () Delete
Name: MCKNIGHT, KARIN
Address: 1401 S. FLORIDA AVE.
City-St-Zip: LAKE LAND, FL 33803

Title: VP () Delete
Name: RUTHVEN, MATT
Address: 41 LAKE MORTON DR
City-St-Zip: LAKE LAND, FL 33801

Title: T () Delete
Name: CARTER, MICHAEL
Address: P.O. BOX 1076
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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change () Addition
Name: RUTHVEN, MATT
Address: 41 LAKE MORTON DRIVE
City-St-Zip: LAKE LAND, FL 33801

Title: VP (X) Change () Addition
Name: BURTON, JOHN
Address: 4175 MEDULLA RD.
City-St-Zip: LAKE LAND, FL 33811

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 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

03/23/2009

Electronic Signature of Signing Officer or Director

Date