2006 NOT-FOR-PROFIT CORPORATION **ANNUAL REPORT (AR)**

Mar 03, 2006 8:00 am Secretary of State DOCUMENT # N9400000544 1. Entity Name 03-03-2006 90118 001 ****61.25 FORT MYERS BEACH KIWANIS CLUB FOUNDATION. INC. Principal Place of Business Mailing Address P O BOX 2507 15501-3 MCGREGOR BLVD STE #3 FT. MYERS FL 33908 FRT. MYERS BEACH FL 33932 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 1st MOORE CR2E037 (10/05) City & State City & State 4. FEI Number Applied For 65-0469747 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name WELTON, ROGER S Street Address (P.O. Box Number is Not Acceptable) 4263 BAY BEACH LN #113 FRT. MYERS BEACH FL 33931 City__ Zip Code 8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE Stunature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE FILE NOW: FEE IS \$61.25 9. Election Campaign Financing Make Check Payable to \$5.00 May Be Due By May 1, 2006 Trust Fund Contribution. Added to Fees Florida Department of State OFFICERS AND DIRECTORS 10. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 11. TITLE Delete TITLE ALLEGIER, ROBERT NAME NAME 15655 OCEAN WALK CIR APT 102 STREET ADDRESS STREET ADDRESS FORT MYERS FL 33908 CITY - ST- ZIP CITY - ST - ZIF Delete TITLE Addition Charles Richardson OY 8009 Lagorn Ry EtMyers Beach, FL, 3393) MEYERS, EDWARD NAME NAME 165 ANCHORAGE ST STREET ADDRESS STREET ADDRESS FORT MYERS BEACH FL 33931 CITY-S1-ZE CITY-ST-7IP TITLE ☐ Delete TITLE SOUTHWORTH, DEAN NAME NAME STREET ADDRESS 169 IBIS STREET STREET ADDRESS CITY-ST-719 FORT MYERS BEACH FL 33931 CITY - ST- ZIP TITLE ☐ Delete TITLE ☐ Change ■ Addition WELTON, ROGER NAME NAME STREET ADDRESS 4263 BAY BEACH LANE STREET ADORESS CITY-ST-7IP FT. MYERS BEACH FL 33931 CITY-ST-ZIE TITLE Delete TITLE Change Change **Addition** ABRAHAM PAUL 450 CONNECTICUT ST VIKI LUSTER BENTY WAY NAME NAME STREET ADDRESS STREET ADDRESS FT. MYLERŠ BĖACH FL 33931 CITY-ST-ZIE CITY-ST-23P **Z**Oelete TITLE TITLE ☐ Change Addition Vernon Fauble 71 KIOWA DY VANDERSPOEL, ARNOLD NAME NAME 243 MIRMARA STREET ADDRESS STREET ADDRESS 1710 Reach, FL, 3393) FORT MYEAS BEACH FL 33931 CITY-ST-ZIP CITY-ST-719

I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all offer like empowered.

JYMIVES

SIGNATURE:

FILED