

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N94000004940

FILED
Feb 16, 2005
Secretary of State

Entity Name: KIWANIS CLUB OF PENSACOLA, FLORIDA, INC.

Current Principal Place of Business:

501 COMMENDENCIA ST
SUITE B
PENSACOLA, FL 32501

New Principal Place of Business:

Current Mailing Address:

PO BOX 2342
PENSACOLA, FL 32513

New Mailing Address:

FEI Number: 59-0970970

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WINDHAM, JOHN F
501 COMMENDENCIA
SUITE B
PENSACOLA, FL 32501 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: PD () Delete
Name: PARIS, MIKE
Address: 3750 GATEWOOD DR
City-St-Zip: PENSACOLA, FL 32514

Title: VD () Delete
Name: WISE, MARK
Address: 9725 SHADOW WOOD DR.
City-St-Zip: PENSACOLA, FL 32514

Title: SD () Delete
Name: WIGGINS, LAURA
Address: 3361 TOMPKINS ST.
City-St-Zip: PENSACOLA, FL 32504

Title: TD () Delete
Name: FORD, SCOTT
Address: 850 APPALOOSA LN
City-St-Zip: PENSACOLA, FL 32533

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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 Section 119.07(3)(i), 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: MARK WISE

VD

02/16/2005

Electronic Signature of Signing Officer or Director

Date