

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000004407

FILED
Apr 30, 2009
Secretary of State

Entity Name: KIWANIS CLUB OF HOLLY HILL, INC.

Current Principal Place of Business:

1652 CORDOVA AVE.
HOLLY HILL, FL 32117

New Principal Place of Business:

224 PERFECT DRIVE
DAYTONA BEACH, FL 32124

Current Mailing Address:

1642 CORDOVA AVE
HOLLY HILL, FL 32117

New Mailing Address:

224 PERFECT DRIVE
DAYTONA BEACH, FL 32124

FEI Number: 59-6168915

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WOOTEN, JOHN
1652 CORDOVA AVE
HOLLY HILL, FL 32117 US

Name and Address of New Registered Agent:

DELLARATA, JOANNE
224 PERFECT DRIVE
DAYTONA BEACH, FL 32124 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: JOANNE DELLARATA

04/30/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: BLALS, GILLES
Address: 710 MAGNOLIA AVE
City-St-Zip: HOLLY HILL, FL 32117

Title: D () Delete
Name: WOOTEN, MARY
Address: 1652 CORDOVA AVE.
City-St-Zip: HOLLY HILL, FL 32117

Title: D () Delete
Name: DAUGHTERY, DAN
Address: 1682 RIVERSIDE DR
City-St-Zip: HOLLY HILL, FL 32117

Title: S () Delete
Name: KOHLMAN, WILLIAM
Address: 234 DAYTON AVE
City-St-Zip: HOLLY HILL, FL 32117

Title: D (X) Delete
Name: MARKOVICH, MICHAEL
Address: 19 RIDGE TRAIL
City-St-Zip: ORMOND BEACH, FL 32174

Title: D (X) Delete
Name: WOODWARD, JIM
Address: 349 TROPICAL LANE
City-St-Zip: ORMOND BEACH, FL 32174

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: O (X) Change () Addition
Name: PINELLO, JOSEPH
Address: 1036 DEERBYSHIRE ROAD
City-St-Zip: DAYTONA BEACH, FL 32117

Title: O (X) Change () Addition
Name: DELLARATA, JOANNE
Address: 224 PERFECT DRIVE
City-St-Zip: DAYTONA BEACH, FL 32124

Title: O (X) Change () Addition
Name: STEVEN, SEGNER
Address: 1737 LOUISIANA ROAD
City-St-Zip: SOUTH DAYTONA, FL 32119

Title: D (X) Change () Addition
Name: JIM, WOODWARD
Address: 349 TROPICAL LANE
City-St-Zip: ORMOND BEACH, FL 32174

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: JOANNE DELLARATA

O

04/30/2009

Electronic Signature of Signing Officer or Director

Date