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NONPROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N95000005646

1. Corporation Name

KIWANIS CLUB OF LEHIGH ACRES-SUNDOWNERS, INC.

Principal Place of Business

1502 CANAL STREET
LEHIGH ACRES FL 33972

Mailing Address

1502 CANAL STREET
LEHIGH ACRES FL 33972



2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

Country

24

25

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

Country

29

30

3. Date Incorporated or Qualified

11/27/1995

4. FEI Number

APPLIED FOR 91-1840128

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution

☐

\$5.00 May Be Added to Fees

9. Name and Address of Current Registered Agent

WILLIAMSON, KEVIN M
1502 CANAL STREET
LEHIGH ACRES FL 33972

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85

Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE PD
NAME RENTFROW, ROBERT
STREET ADDRESS 421 MONROE AVENUE
CITY-ST-ZIP LEHIGH ACRES FL 33972 ☐ DELETE

TITLE VPD
NAME RENTFROW, BARBARA
STREET ADDRESS 421 MONROE AVENUE
CITY-ST-ZIP LEHIGH ACRES FL 33972 ☒ DELETE

TITLE DS
NAME MORTON, LOREEN
STREET ADDRESS 809 ROOSEVELT AVENUE
CITY-ST-ZIP LEHIGH ACRES FL 33972 ☒ DELETE

TITLE T
NAME WILLIAMSON, NANCY
STREET ADDRESS 1502 CANAL STREET
CITY-ST-ZIP LEHIGH ACRES FL 33972 ☒ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE DS
1.2 NAME RENTFROW, BARBARA
1.3 STREET ADDRESS 421 MONROE AVENUE
1.4 CITY-ST-ZIP LEHIGH ACRES, FL. 33972 ☐ Change ☒ Addition

2.1 TITLE T
2.2 NAME WILLIAMSON, KEVIN
2.3 STREET ADDRESS 1502 CANAL ST
2.4 CITY-ST-ZIP LEHIGH ACRES, FL. 33972 ☐ Change ☒ Addition

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP ☐ Change ☐ Addition

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP ☐ Change ☐ Addition

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP ☐ Change ☐ Addition

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP ☐ Change ☐ Addition

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(l), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE REQUIRED

2/15/99 941-369-5841

Date

Daytime Phone #

CR2E037 (1/98)