

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000003644

FILED
Apr 27, 2009
Secretary of State

Entity Name: NORTHSIDE NAPLES KIWANIS FOUNDATION, INC.

Current Principal Place of Business:

850 PARK SHORE DRIVE
THIRD FLOOR
NAPLES, FL 34103

New Principal Place of Business:

Current Mailing Address:

850 PARK SHORE DRIVE
THIRD FLOOR
NAPLES, FL 34103

New Mailing Address:

FEI Number: 65-0697861

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ZAKS, JOSEPH D
850 PARK SHORE DRIVE
THIRD FLOOR
NAPLES, FL 34103 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: P () Delete
Name: TAWOROSKI, ANDREW
Address: 1195 WINDSWEPT AVE
City-St-Zip: NAPLES, FL 34109 US

Title: SEC () Delete
Name: GNERRE, A.C.
Address: 5550 HERON POINT DR
City-St-Zip: NAPLES, FL 34108 US

Title: TR () Delete
Name: GUERRE, A.C.
Address: 28523 CHIANT TER
City-St-Zip: NAPLES, FL 34135 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: BALLO, RICH
Address: 339 4TH AVENUE NO
City-St-Zip: NAPLES, FL 34102 US

Title: SEC (X) Change () Addition
Name: KISSINGER, STEVE
Address: 5550 HERON POINT DR
City-St-Zip: NAPLES, FL 34108 US

Title: TR (X) Change () Addition
Name: GNERRE, ANTHONY C
Address: 28523 CHIANT TER
City-St-Zip: BONITA SPRINGS, FL 34135 US

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: ANTHONY C. GNERRE

TREA

04/27/2009

Electronic Signature of Signing Officer or Director

Date