

| NONPROFIT CORPORATION ANNUAL REPORT 1999 | | FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS | |
|---|--|---|-----------------------|
| DOCUMENT # N97000002873 | | | |
| 1. Corporation Name KIWANIS CLUB OF NINE MILE RD, INC. | | | |
| Principal Place of Business 1040 E NINE MILE RD PENSACOLA FL 32514 US | | Mailing Address P.O. BOX 7568 PENSACOLA FL 32534 US | |
| 2. Principal Place of Business 21 550 E Nine mile Rd. | | 2a. Mailing Address 26 Suite, Apt. #, etc. | |
| 22 Suite, Apt. #, etc. Meeting Wed. 7am | | 27 City & State | |
| 23 City & State Pensacola, FL | | 28 Zip 32514 | |
| 24 Country U.S.A. | | 30 Country | |
| 3. Date Incorporated or Qualified 05/16/1997 | | 4. FEI Number 59-3453766 | |
| 5. Certificate of Status Desired <input type="checkbox"/> | | \$8.75 Additional Fee Required | |
| 6. Election Campaign Financing <input type="checkbox"/> | | \$5.00 May Be Added to Fees | |
| 9. Name and Address of Current Registered Agent COOK, GEORGE JR 1040 E NINE MILE RD PENSACOLA FL 32514 | | 10. Name and Address of New Registered Agent Jeannine M. Wingard 1988 Pauline Street Pensacola FL 32533 | |
| 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: Jeannine M. Wingard DATE: 3/22/99 | | | |
| (NOTE: Registered Agent signature required when reinstating) | | | |
| 12. OFFICERS AND DIRECTORS | | 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | PD COOK, GEORGE JR 1040 E NINE MILE RD PENSACOLA FL 32514 | 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP | D Cook, George Jr. |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | VPD NEWMAN, REBECCA 9908 STONE MEADOW RD PENSACOLA FL 32514 | 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP | PD Rebecca Newman |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | SD WINGARD, JEANNINE 1988 PAULINE ST CANTONMENT FL 32533 | 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | D SPOONER, RICHARD E 8677 N PALAFOX ST PENSACOLA FL 32534 | 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | TD Mark Toler 1841 Kings Way Drive Cantonment, Fl. 32533 | 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | 6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP | |

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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: **Jeannine M. Wingard**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
Jeannine M. Wingard

1-28-99

850-968-3409