## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N99000007521

Entity Name: KIWANIS CLUB OF PANAMA CITY, INC.

FILED Apr 05, 2009 Secretary of State

Current Principal Place of Business:				New Principal Place of Business:			
P.O. BOX 796 PANAMA CITY, FL 32402  Current Mailing Address:				1239 HUNTINGTON RIDGE RD. LYNN HAVEN, FL 32444  New Mailing Address:			
FEI Number:	: 59-6151276	FEI Number Applied For ( )	FEI Nun	nber Not App	licable ( )	Certificate of Status Desired ( )	
Name and	Address of	Current Registered Agent:		Name and	Address of	New Registered Agent:	
1239 HUN LYNN HA\ The above	ND, D. KEITH ITINGTON RIE VEN, FL 3244 named entity	4 US	purpose o	f changing i	ts registered	office or registered agent, or bo	
in the State	e of Florida.				-	-	
SIGNATURE:							
	Electro	nic Signature of Registered Ag	ıent			Date	
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTOR			
Title: Name: Address: City-St-Zip:	D ( WAKSTEIN, H 2693 ISLAND PANAMA CITY	VIEW DR		Title: Name: Address: City-St-Zip:	(	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	FOREHAND, H	STON RIDGE RD		Title: Name: Address: City-St-Zip:	(	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	FOREHAND, K	STON RIDGE RD		Title: Name: Address: City-St-Zip:	D ( PETTIS, HER 1421 HARRIS PANAMA CIT	SON AVE.	
Title: Name: Address: City-St-Zip:	SD ( SMITH, THOM 801 FLORIDA PANAMA CITY	AVE		Title: Name: Address: City-St-Zip:	VP ( DOBBERT, R 324 CARDIFF PANAMA CIT	F CT.	
Title: Name: Address: City-St-Zip:	VP ( HINTON, BRIA 2309 MOUND PANAMA CITY	AVE		Title: Name: Address: City-St-Zip:	PE ( HINTON, BRI, 2309 MOUNE PANAMA CIT	AVE	
Title: Name: Address: City-St-Zip:	SE ( SMITH, TOMM 801 FLORIDA PANAMA CITY	AVE		Title: Name: Address: City-St-Zip:	PP ( SCHNEIDER, 809 HARRISO PANAMA CIT	ON AVE.	

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: KEITH FOREHAND ST 04/05/2009