#### 2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT# 716837** 

Entity Name: KIWANIS CLUB OF LEHIGH ACRES, FLORIDA, INC.

**FILED** Feb 05, 2024 **Secretary of State** 7433690629CC

#### **Current Principal Place of Business:**

15 HOMESTEAD ROAD S LEHIGH ACRES. FL 33936

## **Current Mailing Address:**

15 HOMESTEAD ROAD S LEHIGH ACRES. FL 33936 US

FEI Number: 59-2526208 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

SHELOR, DAMON 15 HOMESTEAD ROAD S LEHIGH ACRES, FL 33936 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: DAMON SHELOR 02/05/2024

Electronic Signature of Registered Agent

Officer/Director Detail:

City-State-Zip:

FT. MYERS FL 33905

Title **PRESIDENT** Title DIRECTOR

SHELOR, DAMON Name Name MINER, JOANNE

211 JACKSON AVENUE 9801 MAPLECREST CIRCLE Address Address

City-State-Zip: LEHIGH ACRES FL 33936 LEHIGH ACRES FL 33936 City-State-Zip:

Title VΡ Title DIRECTOR

Name BUTLER, DAVID ANGLICKIS, RICHARD A Name Address 3904 18TH ST. W Address 643 GRANDVIEW DR.

LEHIGH ACRES FL 33976 City-State-Zip: City-State-Zip: LEHIGH ACRES FL 33936

Title **SECRETARY** Title **DIRECTOR** 

Name GOLDEN, CHARLENE KOENIG, PHILLIP Name Address 1430 HOMESTEAD RD N Address 19930 LAKE VISTA CIRCLE

City-State-Zip: LEHIGH ACRES FL 33936 LEHIGH ACRES FL 33936 City-State-Zip:

Title **CHAIRMAN** Title DIRECTOR Name LIDDLE, GERALD

STANCEL, GREG Name 450 VARSITY LAKES CT. Address Address

12091 PEBBLEBROOK POINT CIRCLE

APT.# 102 City-State-Zip: LEHIGH ACRES FL 33971

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I hereby 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 all other like empowered.

02/05/2024 SIGNATURE: DAMON SHELOR **PRESIDENT** 

Electronic Signature of Signing Officer/Director Detail

Date

Date

# Officer/Director Detail Continued:

Title DIRECTOR

Name LEOPOLD, GENE

Address 3102 5TH ST. SW

201

City-State-Zip: LEHIGH ACRES FL 33971

Title DIRECTOR

Name BOBB-SEMPLE, PAULA Address 3000 8 STREET SW

City-State-Zip: LEHIGH ACRES FL 33976

Title DIRECTOR

Name SLENZCKA, MICHAEL Address 1419 KIMDALE ST. S

City-State-Zip: LEHIGH ACRES FL 33936

Title TREASURER

Name VONDERHAAR, TOM
Address 585 GENEVIEVE DR

City-State-Zip: LEHIGH ACRES FL 33936

Title DIRECTOR

Name VONDERHAAR, PHYLLIS
Address 585 GENEVIEVE DRIVE

City-State-Zip: LEHIGH ACRES FL 33936

Title DIRECTOR

Name BOARDMAN, JOHN Address 2704 E 3RD STREET

City-State-Zip: LEHIGH ACRES FL 33936

Title VP

Name GOLLOPP, DUSTIN Address 633 DESOTO AVE.

City-State-Zip: LEHIGH ACRES FL 33972