

2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

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FILED
Apr 09, 2014
Secretary of State
CC0433253876

Entity Name: KILLEARN KIWANIS CHARITIES, INCORPORATED

Current Principal Place of Business:

4759 LANCASHURE LANE
TALLAHASSEE, FL 32309

Current Mailing Address:

4759 LANCASHURE LANE
TALLAHASSEE, FL 32309 US

FEI Number: 59-3683882

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

COLOMBO, DAVID P
4759 LANCASHURE LANE
TALLAHASSEE, FL 32309 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: DAVID COLOMBO

04/09/2014

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PRESIDENT
Name MILLS, TOMMY
Address LAW ENFORCEMENT EXEMPT
City-State-Zip: TALLAHASSEE FL

Title TREASURER
Name COLOMBO, DAVID
Address 4759 LANCASHURE LANE
City-State-Zip: TALLAHASSEE FL 32309

Title SECRETARY
Name MCBEE, JERRY
Address 3718 DAGGERWING CT
City-State-Zip: TALLAHASSEE FL 32309

Title DIRECTOR
Name DALTON, JON
Address 2917 LASSWADE DRIVE
City-State-Zip: TALLAHASSEE FL 32312

Title DIRECTOR
Name MEARS, NORM
Address 4550 HEDGEWOOD DRIVE
City-State-Zip: TALLAHASSEE FL 32309

Title DIRECTOR
Name ORSILLO, ROBERT
Address 1102 GREEN HILL TRACE
City-State-Zip: TALLAHASSEE FL 32317

Title DIRECTOR
Name KINARD, LYNDA
Address 2318 BYAN PLACE
City-State-Zip: TALLAHASSEE FL 32309

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.

SIGNATURE: DAVID COLOMBO

TREASURER

04/09/2014

Electronic Signature of Signing Officer/Director Detail

Date