

**2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N00000007531

**FILED**  
**Apr 05, 2016**  
**Secretary of State**  
**CC7815352596**

**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

04/05/2016

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

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

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

Title            SECRETARY  
Name            TANKERSLEY, TIM  
Address        3721 WICKLOW CIRCLE  
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            RYOR, JOHN  
Address        5012 TALLOW POINT DRIVE  
City-State-Zip: TALLAHASSEE FL 32309

Title            DIRECTOR  
Name            HERMAN, DEBRA  
Address        8172 BLUE QUILL TRAIL  
City-State-Zip: TALLAHASSEE FL 32312

Title            DIRECTOR  
Name            WYLIE, JIM  
Address        5359 PEMBRIDGE 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**

04/05/2016

Electronic Signature of Signing Officer/Director Detail

Date