

2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000007521

Entity Name: KIWANIS CLUB OF PANAMA CITY, INC.**Current Principal Place of Business:**1239 HUNTINGTON RIDGE RD.
LYNN HAVEN, FL 32444**Current Mailing Address:**P.O. BOX 796
PANAMA CITY, FL 32402**FEI Number:** 59-6151276**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**FOREHAND, D. KEITH
1239 HUNTINGTON RIDGE RD
LYNN HAVEN, FL 32444 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:**

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title TREASURER
Name FOREHAND, D. KEITH
Address 1239 HUNTINGTON RIDGE RD
City-State-Zip: LYNN HAVEN FL 32444

Title PRESIDENT
Name HUNTSUCKER, DOUGLAS
Address 4045 ILEX CR.
City-State-Zip: PANAMA CITY FL 32405

Title DIRECTOR
Name MILLS, CHRIS
Address 118 N. CLAIRE DR
City-State-Zip: PANAMA CITY FL 32401

Title PAST PRESIDENT
Name GUILFORD, MYRON
Address 4906 COLORADO ST.
City-State-Zip: PANAMA CITY FL 32404

Title DIRECTOR
Name CRONWELL, DALE
Address 2652 PRETTY BAYOU ISLAND DR
City-State-Zip: PANAMA CITY FL 32405

Title SECRETARY
Name KREBS, ERIC
Address 1508 B PENN AVE
City-State-Zip: LYNN HAVEN FL 32444

Title DIRECTOR
Name JACK, ELKIN T
Address 338 S. MACARTHUR AVE.
City-State-Zip: PANAMA CITY FL 32401

Title DIRECTOR
Name HINTON, BRIAN
Address 3107 W. 27TH ST
City-State-Zip: PANAMA CITY FL 32405

Continues on page 2

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: D. KEITH FOREHAND**TREASURER****03/19/2023**

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name GALL, DAN
Address 123 JENKS CIRCLE
City-State-Zip: PANAMA CITY FL 32405

Title DIRECTOR
Name BELL, ED
Address 720 KIRKLIN AVE.
City-State-Zip: PANAMA CITY FL 32401

Title VP
Name GALL, STEFANIE
Address 123 JENKS CR
City-State-Zip: PANAMA CITY FL 32405

Title DIRECTOR
Name TRAINOR, SHARON
Address 228 S. CLAIRE DR
City-State-Zip: PANAMA CITY FL 32401

Title DIRECTOR
Name HUFFAKER, JIM
Address 2105 SHAMROCK LANE
City-State-Zip: LYNN HAVEN FL 32444

Title PRERSIDENT ELECT
Name COOK, JACOB
Address 7635 GLEN COVE LN
City-State-Zip: PANAMA CITY FL 32409

Title DIRECTOR
Name SPOON, ERIC
Address 4025 MARY LOUISE DR
City-State-Zip: PANAMA CITY FL 32405