2022 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 13, 2022
Secretary of State
0236171273CC

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

Title	DIRECTOR
Name	CRONWELL, DALE
Address	2652 PRETYY 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

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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.

SIGNATURE: D. KEITH FOREHAND TREASURER 03/13/2022

Electronic Signature of Signing Officer/Director Detail — Date

Officer/Director Detail Continued :

Title	DIRECTOR
Name	CLARK, DAPHNE
Address	P.O. BOX 27506
City-State-Zip:	PANAMA CITY BEACH FL 32411

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

Title	DIRECTOR
Name	WEBB, SUE
Address	702 KENTUCKY AVE.
City-State-Zip:	LYNN HAVEN FL 32444

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