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CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

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SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 MAR 31 PM 3:18

DOCUMENT # 711165 (1)

1. Corporation Name

KWANIS CLUB OF DELTONA, FLORIDA, INC.

Principal Place of Business

C/O VERNON BOWMAN
902 WILMINGTON DR
DELTONA FL 32725

GEORGE DYE
541 BELLTOWER AVENUE
DELTONA, FL 32726-8061

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 07/11/1966	3a. Date of Last Report 04/28/1994
4. FEI Number 59-6164576	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status <input type="checkbox"/>	\$68.75 Supplemental Fee Not Required
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No	

2. Principal Place of Business	2a. Mailing Address
21	26
Suite, Apt. #, etc.	Suite, Apt. #, etc.
22	27
City & State	City & State
23	28
Zip	Country
24	25
29	30

9. Name and Address of Current Registered Agent		81	ed Agent	
BOWMAN, VERNON L. 902 WILMINGTON DR. DELTONA FL 32725		82	GEORGE DYE 541 BELLTOWER AVENUE DELTONA, FL 32726-8061	
		83		
		84		
		FL	85	Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1506, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.005, Florida Statutes.

SIGNATURE: George Dye DATE: 3-14-95
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reconstituting)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	CRAYER, DONALD	1.2 NAME	
STREET ADDRESS	2006 W BARLINGTON DR.	1.3 STREET ADDRESS	
CITY - ST - ZIP	DELTONA FL	1.4 CITY - ST - ZIP	
TITLE	D	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	EUVERARD, WILL	2.2 NAME	
STREET ADDRESS	2182 HARNLIN CT	2.3 STREET ADDRESS	
CITY - ST - ZIP	DELTONA, FL 00000	2.4 CITY - ST - ZIP	
TITLE	D	3.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BAGNON, COLLETTE	3.2 NAME	
STREET ADDRESS	1074 BEASLEY DR	3.3 STREET ADDRESS	
CITY - ST - ZIP	DELAND FL	3.4 CITY - ST - ZIP	
TITLE	SD	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	JONES, HORACE	4.2 NAME	
STREET ADDRESS	1390 WOODBINE AVE	4.3 STREET ADDRESS	
CITY - ST - ZIP	DELTONA FL	4.4 CITY - ST - ZIP	
TITLE	D	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	EBERT, ARTHUR	5.2 NAME	
STREET ADDRESS	960 DELTONA BLVD	5.3 STREET ADDRESS	
CITY - ST - ZIP	DELTONA, FL 00000	5.4 CITY - ST - ZIP	
TITLE	P	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	LEVEILLE, DONALD	6.2 NAME	
STREET ADDRESS	416 S BOUNDARY AVE	6.3 STREET ADDRESS	
CITY - ST - ZIP	DELAND FL	6.4 CITY - ST - ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 017, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: George Dye DATE: 2-27-95 107-574-7575
Signature and typed or printed name of signing officer or director (Date) (Typed Phone #)