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Feb 13 1997 8:00am
Secretary of State

NONPROFIT CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # 711165 (1)

1. Corporation Name

KIWANIS CLUB OF DELTONA, FLORIDA, INC.



Principal Place of Business

Mailing Address

GEORGE DYE
541 BELLTOWER AVENUE
DELTONA FL 32725-8061
US

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541 BELLTOWER AVENUE
DELTONA FL 32725-8061
US

3. Date Incorporated or Qualified
07/11/1966

3a. Date of Last Report
01/25/1996

2. Principal Place of Business

2a. Mailing Address

4. FEI Number
59-6164576

Applied For
Not Applicable

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

22 City & State

27 City & State

6. Election Campaign Financing
Trust Fund Contribution

\$5.00 May Be
Added to Fees

23 Zip

25 Country

28 Zip

30 Country

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes Yes No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

GEORGE DYE
541 BELLTOWER AVENUE
DELTONA FL 32725

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, 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 617.0503, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE D DELETE
NAME CRAVER, DONALD
STREET ADDRESS 2008 W BURLINGTON DR.
CITY-ST-ZIP DELTONA FL

1.1 TITLE Change Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

TITLE D DELETE
NAME EUVERARD, WILL
STREET ADDRESS 2182 HAINLIN CT
CITY-ST-ZIP DELTONA, FL 00000

2.1 TITLE Change Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

TITLE P DELETE
NAME GEORGE DYE
STREET ADDRESS 541 BELLTOWER AVENUE
CITY-ST-ZIP DELTONA FL

3.1 TITLE Change Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP
P ROY GWALTNEY
2074 SWOOK DRIVE
DELTONA FL 32725

TITLE SD DELETE
NAME JONES, HORACE
STREET ADDRESS 1380 WOODBINE AVE
CITY-ST-ZIP DELTONA FL

4.1 TITLE Change Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP
D JONES, HORACE
1380 WOODBINE
DELTONA FL 32725

TITLE D DELETE
NAME EBERT, ARTHUR
STREET ADDRESS 960 DELTONA BLVD
CITY-ST-ZIP DELTONA, FL 00000

5.1 TITLE Change Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

TITLE P DELETE
NAME LEVILLE, DONALD
STREET ADDRESS 416 S BOUNDARY AVE
CITY-ST-ZIP DELAND FL

6.1 TITLE Change Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP
S HARRY FAUBER
771 E. NORMANDY BL.
DELTONA, FL. 32725

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Darryl Fauber
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
Date HARRY FAUBER 020497 (407) 514 9087
Daytime Phone # 0012814

CF2E037 (9/96)