

FILE NOW: FILING FEE IS \$61.25

FILED

Apr 10 1997 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Morheim Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **736917** (6)
1. Corporation Name
KIWANIS CLUB OF COUNTRYSIDE, CLEARWATER, FLORIDA, INC.

Principal Place of Business C/O CHARLES R. HILLEBOE 2790 SUNSET POINT RD CLEARWATER FL 34619	Mailing Address C/O CHARLES R. HILLEBOE 2790 SUNSET POINT RD CLEARWATER FL 34619-1503
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2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip Country		2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip Country		3. Date Incorporated or Qualified 09/29/1976	3a. Date of Last Report 03/01/1996
4. FEI Number 69-1644320		5. Certificate of Status Desired ☐		Applied For Not Applicable	
6. Election Campaign Financing Trust Fund Contribution ☐		7. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☐ No		\$8.75 Additional Fee Required \$5.00 May Be Added to Fees	

9. Name and Address of Current Registered Agent HILLEBOE, CHARLES R. 2790 SUNSET POINT RD CLEARWATER FL 34619		10. Name and Address of New Registered Agent 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City 85 Zip Code FL	
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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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DT BISHOP, KAREN L 1646 ST MARY DRIVE DUNEDIN FL ☒ DELETE	1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP	DT Daniel Palmisano 2246 Warwick Dr Oldsmar, FL 34677-0033 ☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DPE BOUTON, STEPHEN F 748 SEVERS LANDING PALM HARBOR FL 34683 ☐ DELETE	2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP	DP Stephen F Bouton 748 Severs Lndg Palm Harbor FL 34683-6226 ☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD ALDRICH, GEORGE S. 902 PINELLAS ST. CLEARWATER FL ☐ DELETE	3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP BUNCH, JR. E J 140 HARBOR DRIVE OZONA FL ☒ DELETE	4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP HARDIN, GEORGE 1121 VICTORIA DR. DUNEDIN FL 34608-5758 ☐ DELETE	5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP	DP George Hardin 1121 Victoria Dr Dunedin FL 34608-5758 ☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP	400002140094 -04/11/97--01007--044 ***61.25 ☐ Change ☐ Addition

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: Sandra B. Morheim REQUIRED

2-5-97

Date Daytime Phone # 0087089

CF2E037 (9/96)