FILE NOW: FILING FEE AFTER MAY 1 IS $155.00

CORPORATION ANNUAL REPORT **1995**

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

APPROVED AND FILED

95 APR 20 PM 12:24

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE

DOCUMENT # 743077 (0)

1. Corporation Name

WINTER PARK SUNRISE KIWANIS CLUB, INC.

Principal Place of Business	Mailing Address
PO BOX 1314 WINTER PARK FL 32790 US	PO BOX 1314 WINTER PARK FL 32790 US

3. Date Incorporated or Qualified: **06/13/1978**

3a. Date of Last Report: **02/03/1994**

4. FEI Number: **59-1787127** ☐ Applied For ☐ Not Applicable

2. Principal Place of Business (21)

2a. Mailing Address (26)

Suite, Apt. #, etc. (22)

Suite, Apt. #, etc. (27)

City & State (23)

City & State (28)

Zip (24) Country (25)

Zip (29) Country (30)

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

7. Nonprofit with IRS 501(c)(3) Tax Exempt Status ☒ **$68.75** Supplemental Fee Not Required

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

9. Name and Address of Current Registered Agent

KRACK, RICK D
425 SUNDOWN TRAIL
CASSELBERRY FL 32707

10. Name and Address of New Registered Agent

81 Name: RICK D. KRACK

82 Street Address (P.O. Box Number is Not Acceptable): 1384 AVERSWOOD COURT

83

84 City: WINTER SPRINGS FL 85 Zip Code: 32708

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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 607.0505, Florida Statutes.

SIGNATURE: Rick D. Krack RICK D. KRACK — 4/17/95

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	1.1 TITLE		☐ Change ☐ Addition
NAME	SCHIAVO, FRANK L.	1.2 NAME		
STREET ADDRESS	1095 MCKEAN CIR	1.3 STREET ADDRESS		
CITY-ST-ZIP	WINTER PARK FL	1.4 CITY-ST-ZIP		
TITLE	TD	2.1 TITLE		☐ Change ☐ Addition
NAME	KRACK, RICK D	2.2 NAME		
STREET ADDRESS	425 SUNDOWN TRAIL	2.3 STREET ADDRESS		
CITY-ST-ZIP	CASSELBERRY FL	2.4 CITY-ST-ZIP		
TITLE	VPD	3.1 TITLE		☐ Change ☐ Addition
NAME	TAYLOR, LARRY	3.2 NAME		
STREET ADDRESS	1818 WEATHERED WOOD CIRCLE	3.3 STREET ADDRESS		
CITY-ST-ZIP	WINTER SPRINGS FL	3.4 CITY-ST-ZIP		
TITLE	D	4.1 TITLE		☐ Change ☐ Addition
NAME	MELLIN, RICK	4.2 NAME		
STREET ADDRESS	354 MASHIE LANE	4.3 STREET ADDRESS		
CITY-ST-ZIP	ORLANDO FL	4.4 CITY-ST-ZIP		
TITLE	D	5.1 TITLE		☐ Change ☐ Addition
NAME	REESE, BOB	5.2 NAME		
STREET ADDRESS	952 MOSS LANE	5.3 STREET ADDRESS		
CITY-ST-ZIP	WINTER PARK FL	5.4 CITY-ST-ZIP		
TITLE	PD	6.1 TITLE		☐ Change ☐ Addition
NAME	SANDERS, MARGARET	6.2 NAME		
STREET ADDRESS	641 WILLIAM DRIVE	6.3 STREET ADDRESS		
CITY-ST-ZIP	WINTER PARK 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)(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: Rick D. Krack RICK D. KRACK — 4/17/95 — 407-647-6441

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

000381