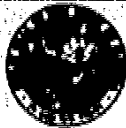


FILE NOW: FILING FEE AFTER MAY 1 IS \$155.00

**CORPORATION
ANNUAL REPORT
1995**



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

**APPROVED
AND
FILED**

DOCUMENT # 743077 (0)

1. Corporation Name

WINTER PARK SUNRISE KIWANIS CLUB, INC.

95 APR 20 PM 12:24

SECRETARY OF STATE
TALLAHASSEE, FLORIDA
DO NOT WRITE IN THIS SPACE

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. FBI Number

59-1787127

Applied For

Not Applicable

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

Zip

Country

24

25

29

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

10. Name and Address of New Registered Agent

**KRACK, RICK D
425 SUNDOWN TRAIL
CASSELBERRY FL 32707**

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

32709

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

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

(NOTE: Registered Agent signature required when reinstating)

4/17/95

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	D
NAME	SCHIAVO, FRANK L.
STREET ADDRESS	1095 MCKEAN CIR
CITY - ST - ZIP	WINTER PARK FL
TITLE	TD
NAME	KRACK, RICK D
STREET ADDRESS	425 SUNDOWN TRAIL
CITY - ST - ZIP	CASSELBERRY FL
TITLE	VPD
NAME	TAYLOR, LARRY
STREET ADDRESS	1818 WEATHERED WOOD CIRCLE
CITY - ST - ZIP	WINTER SPRINGS FL
TITLE	D
NAME	MELIN, RICK
STREET ADDRESS	354 MASHIE LANE
CITY - ST - ZIP	ORLANDO FL
TITLE	D
NAME	REESE, BOB
STREET ADDRESS	952 MOSS LANE
CITY - ST - ZIP	WINTER PARK FL
TITLE	PD
NAME	SANDERS, MARGARET
STREET ADDRESS	641 WILLIAM DRIVE
CITY - ST - ZIP	WINTER PARK FL

1.1 TITLE	☐ Change ☐ Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY - ST - ZIP	
2.1 TITLE	☐ Change ☐ Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY - ST - ZIP	
3.1 TITLE	☐ Change ☐ Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY - ST - ZIP	
4.1 TITLE	☐ Change ☐ Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY - ST - ZIP	
5.1 TITLE	☐ Change ☐ Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY - ST - ZIP	
6.1 TITLE	☐ Change ☐ Addition
6.2 NAME	
6.3 STREET ADDRESS	
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 110.07(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 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

DATE

367-647-6444

Telephone #