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FILED

Apr 09 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 # N38793 (8)

1. Corporation Name

KWANIS CLUB OF SEVEN HILLS, INC.

Principal Place of Business

Mailing Address

P.O. BOX 3218  
SPRING HILL FL 34606 34611-3218

P.O. BOX 3218  
SPRING HILL FL 34611-3218



2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip Country

28 Zip Country

24

29 30

9. Name and Address of Current Registered Agent

3. Date Incorporated or Qualified  
06/22/1990

3a. Date of Last Report  
02/27/1996

4. FEI Number  
59-2982323

Applied For  
Not Applicable

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

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

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

10. Name and Address of New Registered Agent

PAUL, NESSLER J  
4040 COMMERCIAL WAY  
SUITE 4  
SPRING HILL FL 34606

81 Name

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

83

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

TITLE D ☒ DELETE  
NAME KOENIG, WILLIAM T.  
STREET ADDRESS 140 OAK LANE DR.  
CITY-ST-ZIP SPRING HILL FL

TITLE ☒ DELETE  
NAME FERNANDEZ, CHARLIE  
STREET ADDRESS 430 FLORIAN WAY  
CITY-ST-ZIP SPRING HILL FL

TITLE ☒ DELETE  
NAME DOWNEY, ED  
STREET ADDRESS 12810 BOX DRIVE  
CITY-ST-ZIP HUDSON FL

TITLE ☒ DELETE  
NAME BATES, KRIS  
STREET ADDRESS 4090 COMMERCIAL WAY #6  
CITY-ST-ZIP SPRING HILL FL

TITLE ☒ DELETE  
NAME MOORE, SCOTT T  
STREET ADDRESS 176 MARINER BLVD.  
CITY-ST-ZIP SPRING HILL FL

TITLE ☒ DELETE  
NAME ATEN, JIM  
STREET ADDRESS 1195 BATTER SEA AVENUE  
CITY-ST-ZIP SPRING HILL FL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE D ☐ Change ☒ Addition  
1.2 NAME MIKE CZUKA  
1.3 STREET ADDRESS 14346 LACASITA AVE.  
1.4 CITY-ST-ZIP SPRING HILL, FL

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 T ☐ Change ☒ Addition  
5.2 NAME GLEE GATES  
5.3 STREET ADDRESS 12239 GLEN HAVEN ST  
5.4 CITY-ST-ZIP SPRING HILL, FL

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 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.

CR2E037 (9/96)