


**FILE NOW: FILING FEE IS \$61.25**

**FILED**

**Apr 21 1998 8:00am  
Secretary of State**

NONPROFIT CORPORATION ANNUAL REPORT <b>1998</b>		FLORIDA DEPARTMENT OF STATE <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS
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**DOCUMENT # N46252 (5)**  
1. Corporation Name  
**J.K.V. FOUNDATION, INC.**



Principal Place of Business <b>101 NORTHLAKE DRIVE ORANGE CITY FL 32763</b>	Mailing Address <b>101 NORTHLAKE DRIVE ORANGE CITY FL 32763</b>
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3. Date Incorporated or Qualified <b>12/03/1991</b>		
4. FEI Number <b>59-3108265</b>	Applied For <input type="checkbox"/>	Not Applicable <input checked="" type="checkbox"/>
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75 Additional Fee Required</b>	
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	<b>\$5.00 May Be Added to Fees</b>	
7. Is this nonprofit corporation a homeowners association? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		

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
25	30

9. Name and Address of Current Registered Agent

**WRIGHT, GARY S  
301 N VOLUSIA AVE.  
ORANGE CITY FL 32763**

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

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: *Gary S Wright, Attorney* DATE: *March 26, 1998*

12. OFFICERS AND DIRECTORS		
TITLE	<b>D</b>	<input type="checkbox"/> DELETE
NAME	<b>BRUNNING, BARBARA</b>	
STREET ADDRESS	<b>725 N. FLORIDA AVE</b>	
CITY-ST-ZIP	<b>DELAND FL</b>	
TITLE	<b>D</b>	<input type="checkbox"/> DELETE
NAME	<b>BAUERLE, TODD A</b>	
STREET ADDRESS	<b>505 EAST NEW YORK AVE.</b>	
CITY-ST-ZIP	<b>DELAND FL</b>	
TITLE	<b>VCD</b>	<input checked="" type="checkbox"/> DELETE
NAME	<b>ROBERTSON, H.S. JR.</b>	
STREET ADDRESS	<b>PO BOX 1469 N/A</b>	
CITY-ST-ZIP	<b>NEW SMYRNA BCH. FL 32170-1469</b>	
TITLE	<b>CD</b>	<input type="checkbox"/> DELETE
NAME	<b>JAMES, MARGARET</b>	
STREET ADDRESS	<b>7-B WESTLAKE DR</b>	
CITY-ST-ZIP	<b>ORANGE CITY FL</b>	
TITLE	<b>D</b>	<input type="checkbox"/> DELETE
NAME	<b>STARK, DENNIS M</b>	
STREET ADDRESS	<b>1907 ODHAM DRIVE</b>	
CITY-ST-ZIP	<b>DELAND FL</b>	
TITLE	<b>D</b>	<input type="checkbox"/> DELETE
NAME	<b>CORNETT, TAVER</b>	
STREET ADDRESS	<b>500 E NEW YORK AVE.</b>	
CITY-ST-ZIP	<b>DELAND FL 32720</b>	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
1.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME		
1.3 STREET ADDRESS		
1.4 CITY-ST-ZIP		
2.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME		
2.3 STREET ADDRESS		
2.4 CITY-ST-ZIP		
3.1 TITLE	<b>D</b>	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
3.2 NAME	<b>Frank Knight</b>	
3.3 STREET ADDRESS	<b>880 Lakeshore Dr.</b>	
3.4 CITY-ST-ZIP	<b>Enterprise, FL 32725</b>	
4.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY-ST-ZIP		
5.1 TITLE	<b>VCD</b>	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	<b>Stark, Dennis M.</b>	
5.3 STREET ADDRESS	<b>1907 Odham Drive</b>	
5.4 CITY-ST-ZIP	<b>DeLand, FL</b>	
6.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY-ST-ZIP		

14. I 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: *Margaret T. James* *Margaret T James 04/03/98 904 1775 7331*

CR2E037 (10/97)

**\* ATTACHED SHEET FOR DOCUMENT #N46252/1998**

**J.K.V. FOUNDATION, INC.**

<b><u>TITLE</u></b>	<b><u>NAME OF OFFICERS AND/OR DIRECTORS</u></b>	<b><u>ADDRESS</u></b>
D	FISH, WENDELL	3-A Jonquil Ct. Orange City, FL 32763
D	HARDESTY, ALONZO H. III	1450 S. Volusia Ave. Suite 7 Orange City, FL 32763
TD	MCGHIN, ANDREW G. JR.	3-A Dogwood Court Orange City, FL 32763

**OFFICERS BUT NOT BOARD MEMBERS:**

AT	COURTICE, RICHARD	2-B Dogwood Court Orange City, FL 32763
S	CALLANDER, MARGARET	9-B Azalia Drive Orange City, FL 32763

**DELETIONS:**

S	WOLFE, MARGERY	24-A Florabunda Cr. Orange City, FL 32763
D	WEBER, WALTER	15-A Sweetgum Dr. Orange City, FL 32763