

FILE NOW: FILING FEE IS \$61.25

**FILED**  
**May 12, 1999 8:00 am**  
**Secretary of State**

05-12-1999 90006 050 \*\*\*\*61.25

**NONPROFIT  
CORPORATION  
ANNUAL REPORT  
1999**



FLORIDA DEPARTMENT OF STATE  
**Katherine Harris**  
Secretary of State  
DIVISION OF CORPORATIONS

**DOCUMENT # N46353**

1. Corporation Name

**KIWANIS CLUB OF BROOKSVILLE, INC.**

Principal Place of Business

P.O. BOX 685  
BROOKSVILLE FL 34605-0685

Mailing Address

P.O. BOX 685  
BROOKSVILLE FL 34605-0685



2. Principal Place of Business

2a. Mailing Address

3. Date Incorporated or Qualified

**12/05/1991**

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

4. FEI Number

**59-6152216**

Applied For

Not Applicable

23 City & State

27 City & State

5. Certificate of Status Desired ☐

**\$8.75 Additional  
Fee Required**

24 Zip Country

28 Zip Country

6. Election Campaign Financing  
Trust Fund Contribution ☐

**\$5.00 May Be  
Added to Fees**

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**EPPLEY, KENT  
111 NORTH MAIN STREET  
BROOKSVILLE FL 34601**

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

**KENT EPPLEY**

**APRIL 27, 1999**

12. OFFICERS AND DIRECTORS

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE **P** ☐ DELETE  
NAME **CARLTON, RICK**  
STREET ADDRESS **609 ERIN WAY**  
CITY-ST-ZIP **BROOKSVILLE FL 34601**

1.1 TITLE  
1.2 NAME  
1.3 STREET ADDRESS  
1.4 CITY-ST-ZIP

**D**

☒ Change ☐ Addition

TITLE **D** ☐ DELETE  
NAME **CARTER, ROYCE**  
STREET ADDRESS **24164 WESTMINSTER COURT**  
CITY-ST-ZIP **BROOKSVILLE FL 34601**

2.1 TITLE  
2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY-ST-ZIP

☐ Change ☐ Addition

TITLE **T** ☒ DELETE  
NAME **GOLDSTEN, MARK**  
STREET ADDRESS **9103 MANCHESTER ST**  
CITY-ST-ZIP **SPRING HILL FL 34606**

3.1 TITLE  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP

☐ Change ☐ Addition

TITLE **V** ☐ DELETE  
NAME **CLEAVELAND, BEN**  
STREET ADDRESS **175 MOUNT FAIR AVE**  
CITY-ST-ZIP **BROOKSVILLE FL 34607**

4.1 TITLE  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP

**P**

☒ Change ☐ Addition

TITLE **V** ☐ DELETE  
NAME **MARRERO, CARLOS**  
STREET ADDRESS **523 COLONIAL DR**  
CITY-ST-ZIP **BROOKSVILLE FL 34601**

5.1 TITLE  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

☐ Change ☐ Addition

TITLE **D** ☐ DELETE  
NAME **HEINECKE, PHIL**  
STREET ADDRESS **103 BELL AVE**  
CITY-ST-ZIP **BROOKSVILLE FL 34601**

6.1 TITLE  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP

☐ Change ☐ Addition

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, with all other like empowered.

SIGNATURE:

**SIGNATURE**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**APRIL 27, 1999**

Date

**(352) 796-5151**

Daytime Phone #

CR2E037 (1/98)

PAGE 2 OF 2 KIWANIS CLUB OF BROOKSVILLE, INC.

540632-90000-50

# N46353

LUTHER E CASON

(D)

P.O. BOX 836

BROOKSVILLE FL 34605

SANDRA L REYNOLDS (T)

2261 CHAMPLAIN AVE

SPRING HILL FL 34609

SUSAN C NICASTRO

(D)

14421 VAN CT

SPRING HILL FL 3460

CARL T STEINKAMP II (P)

14494 CORTEZ BLVD

BROOKSVILLE FL 34601

CHARLES G MIXSON

(D)

51 LARK AVENUE

BROOKSVILLE FL 34601

PEYTON B HYSLOP

(S)

P.O. BOX 1776

BROOKSVILLE FL 34605

LESTER SAMPLES III

(D)

23378 CROOM RD

BROOKSVILLE FL 34601

RALPH J BURPIN

(D)

10427 CARLIN DR

BROOKSVILLE FL 34601

STEVEN A HELM

(V)

645 PONCE DE LEON BLVD

BROOKSVILLE FL 34601