

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

CORPORATION  
ANNUAL REPORT  
1995



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

DOCUMENT # **N50977** (0)  
1. Corporation Name  
**KIWANIS CLUB OF PROGRESSIVE SARASOTA, INC.**

Principal Place of Business Mailing Address  
**1550 RINGLING BLVD. SARASOTA FL 34236**

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 25 29 30

9. Name and Address of Current Registered Agent  
**MOORE, JOHN L.  
WILLIAMS, PARKER, HARRISON, DIETZ & GREEN  
1550 RINGLING BLVD.  
SARASOTA FL 34236**

10. Name and Address of New Registered Agent  
81 Name  
82 Street Address (P.O. Box Number is Not Acceptable)  
83  
84 City **FL** 85 Zip Code

DO NOT WRITE IN THIS SPACE  
3. Date Incorporated or Qualified **09/23/1992** 3a. Date of Last Report **01/21/1994**  
4. FEI Number **65-0340815** Applied For Not Applicable  
5. Certificate of Status Desired  \$0.75 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

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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reappointing) DATE \_\_\_\_\_

12. OFFICERS AND DIRECTORS  
TITLE NAME STREET ADDRESS CITY-ST-ZIP  
-D COLLUMS, KATHY M. 2159 CORK OAK E ST SARASOTA FL  
-D GALANTE, EILEEN 1750 RINGLING BLVD. SARASOTA FL  
D ALLAN, MISLINE 6159 CANDLEWOOD WAY SARASOTA FL  
D MENCHINGER, THOMAS A. 4316 ARDALE ST SARASOTA FL  
D MOORE, JOHN L. 1550 RINGLING BLVD SARASOTA FL  
D STEVENS, LINDA 3145 57TH AVE. CIR. E BRADENTON FL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  
1.1 TITLE Director  Change  Addition  
1.2 NAME Ron Wilds  
1.3 STREET ADDRESS 2328 N. Washington Blvd  
1.4 CITY-ST-ZIP SARASOTA FL 33580  
2.1 TITLE Director  Change  Addition  
2.2 NAME William Sudo  
2.3 STREET ADDRESS 3100 Fruitville Rd  
2.4 CITY-ST-ZIP Sarasota, FL 34232  
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 Director  Change  Addition  
6.2 NAME Curtis Kozar  
6.3 STREET ADDRESS 501 N. Beneva Rd. Suite 550  
6.4 CITY-ST-ZIP Sarasota FL 34232

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)(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: John L. Moore **John L. Moore** 1/25/94 813 366-4800  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #