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FILED

Mar 11 1997 8:00am
Secretary of StateNONPROFIT
CORPORATION
ANNUAL REPORT
1997FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 704036 (3)

1. Corporation Name

KIWANIS CLUB OF INDIANTOWN, FLORIDA, INC.

Principal Place of Business

P. O. BOX 597
INDIANTOWN FL 34956

Mailing Address

P. O. BOX 597
INDIANTOWN FL 34956-0597

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

Country

24

25

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

Country

29

30

3. Date Incorporated or Qualified

05/15/1962

3a. Date of Last Report

04/26/1996

4. FEI Number

59-6166203

Applied For

Not Applicable

5. Certificate of Status Desired

☐\$8.75 Additional
Fee Required6. Election Campaign Financing
Trust Fund Contribution☐\$5.00 May Be
Added to Fees6. 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

SUMMERS, WILLIAM C
14751 SW AMERICAN ST
INDIANTOWN FL 34956

81 Name

Brian Powers

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

16600 SW Warfield Blvd

83

84 City

Indiantown

FL

85 Zip Code

34956

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

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE P ☒ DELETE
NAME POWERS, BRIAN
STREET ADDRESS 16600 SW WARFIELD BLVD
CITY - ST - ZIP INDIANTOWN FL1.1 TITLE P ☒ Change ☐ Addition
1.2 NAME POWERS, BRIAN
1.3 STREET ADDRESS 16600 SW Warfield Blvd.
1.4 CITY - ST - ZIP Indiantown, FL 34956TITLE V ☐ DELETE
NAME PADGETT, SUSAN
STREET ADDRESS 10510 JUPITER NARROWS DR
CITY - ST - ZIP HOBE SOUND FL2.1 TITLE S ☒ Change ☐ Addition
2.2 NAME HEIZLER, KAREN
2.3 STREET ADDRESS 16401 SW Farms Road
2.4 CITY - ST - ZIP Indiantown, FL. 34956TITLE D ☐ DELETE
NAME SKINNER, MARSHALL
STREET ADDRESS 3043 SE QUANSET CIR
CITY - ST - ZIP STUART FL3.1 TITLE T ☐ Change ☒ Addition
3.2 NAME SCOTT, RACHEL
3.3 STREET ADDRESS 1401 SE Monterey Rd.
3.4 CITY - ST - ZIP Stuart, FL. 34994TITLE S ☒ DELETE
NAME HEISLER, KAREN
STREET ADDRESS 16401 SW FARMS RD PO BOX 287
CITY - ST - ZIP INDIANTOWN FL4.1 TITLE D ☐ Change ☒ Addition
4.2 NAME WAIDE, LORRAINE
4.3 STREET ADDRESS PO Box 836 NA
4.4 CITY - ST - ZIP Indiantown, FL. 34956TITLE D ☒ DELETE
NAME STEVENS, LARRY
STREET ADDRESS PO BOX 385 15588 SW WARFIELD BLVD
CITY - ST - ZIP INDIANTOWN FL5.1 TITLE D ☐ Change ☒ Addition
5.2 NAME ADAMS, ROY
5.3 STREET ADDRESS PO Box 248 NA
5.4 CITY - ST - ZIP Indiantown, FL. 34956TITLE D ☐ DELETE
NAME WHITAKER, EDGAR
STREET ADDRESS PO BOX 422 NA
CITY - ST - ZIP INDIANTOWN FL6.1 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.

SIGNATURE: B. MORTHAM

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

02-05-97

561-597-2268

CR2E037 (9/96)