

FILE NOW: FILING FEE IS \$61.25

FILED

Mar 16 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
--	---	---

**DOCUMENT # 706336 (5)**  
1. Corporation Name  
**KIWANIS CLUB OF PORT CHARLOTTE FLORIDA, INC.**



Principal Place of Business <b>P.O. BOX 3946 PORT CHARLOTTE FL 33949</b>	Mailing Address <b>P.O. BOX 3946 PORT CHARLOTTE FL 33949</b>
---	---

3. Date Incorporated or Qualified <b>10/25/1963</b>	
4. FEI Number <b>59-6144693</b>	Applied For <input type="checkbox"/> Not Applicable

2. Principal Place of Business <b>21</b> Suite, Apt. #, etc. <b>22</b> City & State <b>23</b> Zip <b>24</b> Country	2a. Mailing Address <b>26</b> Suite, Apt. #, etc. <b>27</b> City & State <b>28</b> Zip <b>29</b> Country
---	--

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

9. Name and Address of Current Registered Agent  <b>LEVIN, ALLEN J. 3440 CONWAY BLVD. SUITE 1-A PORT CHARLOTTE FL 33952</b>	10. Name and Address of New Registered Agent <b>81</b> Name <b>82</b> Street Address (P.O. Box Number is Not Acceptable) <b>83</b> <b>84</b> City <b>FL</b> <b>85</b> 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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD	1.1 TITLE	PD
NAME	BROWN, LAWRENCE	1.2 NAME	TALLEY, ROBERT
STREET ADDRESS	3514 LASCOC AVE.	1.3 STREET ADDRESS	1694 VISCAYA AVE.
CITY-ST-ZIP	NORTHPORT FL	1.4 CITY-ST-ZIP	PORT CHARLOTTE, FL 33952
TITLE	PED	2.1 TITLE	PED
NAME	TALLEY, ROBERT	2.2 NAME	LEVIN, ALLEN J.
STREET ADDRESS	1694 VISCAYA AVE.	2.3 STREET ADDRESS	3440 CONWAY BLVD, STE 1-A
CITY-ST-ZIP	PORT CHARLOTTE FL	2.4 CITY-ST-ZIP	PORT CHARLOTTE, FL 33952
TITLE	VPD	3.1 TITLE	VPD
NAME	LEVIN, ALLEN J	3.2 NAME	JOHNSON, ROY
STREET ADDRESS	3440 CONWAY BLVD., STE. 1-A	3.3 STREET ADDRESS	724 NW ELKCAM BLVD
CITY-ST-ZIP	PORT CHARLOTTE FL	3.4 CITY-ST-ZIP	PORT CHARLOTTE, FL 33952
TITLE	SD	4.1 TITLE	SD
NAME	PRICE, DAVID	4.2 NAME	NOVAK, EUGENE
STREET ADDRESS	3123 DAVID ST., RET. 23	4.3 STREET ADDRESS	1585 VISCAYA AVE.
CITY-ST-ZIP	PUNTA GORDA FL	4.4 CITY-ST-ZIP	PORT CHARLOTTE, FL 33952
TITLE	TD	5.1 TITLE	TD
NAME	KING, PAUL G	5.2 NAME	KING, PAUL G.
STREET ADDRESS	933 TROPICAL AVE.	5.3 STREET ADDRESS	933 TROPICAL AVE.
CITY-ST-ZIP	PORT CHARLOTTE FL	5.4 CITY-ST-ZIP	PORT CHARLOTTE, FL 33948
TITLE		6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		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: *Paul G. King* **Paul G. King** 3/10/98 941-625-2674

CR2E037 (10/97)