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Apr 07 1997 8:00am  
Secretary of State

NONPROFIT  
CORPORATION  
ANNUAL REPORT  
1997



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

DOCUMENT # 707933 (8)

1. Corporation Name

KIWANIS CLUB OF CLEARWATER, INC.

Principal Place of Business

POST OFFICE BOX 8206  
CLEARWATER FL 34618

Mailing Address

POST OFFICE BOX 8206  
CLEARWATER FL 34618-8206



3. Date Incorporated or Qualified  
10/09/1964

3a. Date of Last Report  
04/17/1996

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

Country

4. FEI Number

59-0965990

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution

\$5.00 May Be  
Added to Fees

8. 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

WOLLETT, FRANKLYN J.  
2790 SUNSET POINT RD.  
CLEARWATER FL 34619

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

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE P \*\*\*DELETE  
NAME GRAY, PHILLIP J.  
STREET ADDRESS 1025 KENWOOD DRIVE  
CITY-ST-ZIP DUNEDIN FL

1.1 TITLE President \*\*\*Change  
1.2 NAME Johansen, Ward  
1.3 STREET ADDRESS 2480 Stag Run Blvd.  
1.4 CITY-ST-ZIP Clearwater, FL 34625

TITLE PE \*\*\*DELETE  
NAME JOHANSEN, WARD  
STREET ADDRESS 1500 FARRIER TRAIL  
CITY-ST-ZIP CLEARWATER FL

2.1 TITLE President-Elect \*\*\*Change  
2.2 NAME Brandt, Mark, S.  
2.3 STREET ADDRESS 6604 W. Chelsea  
2.4 CITY-ST-ZIP Tampa, FL 33634

TITLE ST  
NAME VEST, ROBERT A.  
STREET ADDRESS 2085 ATTACHE COURT  
CITY-ST-ZIP CLEARWATER FL 34695

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

TITLE T  
NAME TAYLOR, BRUCE  
STREET ADDRESS 14030 TERN LANE  
CITY-ST-ZIP CLEARWATER FL

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

TITLE D  
NAME WOLLETT, FRANKLYN J  
STREET ADDRESS 1980 DUNBRODY COURT  
CITY-ST-ZIP DUNEDIN FL

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

TITLE D  
NAME BARNETT, WILLIAM G. III  
STREET ADDRESS 2154 WOOD COURT  
CITY-ST-ZIP PALM HARBOR FL

6.1 TITLE  
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:

Robert A. Vest

3/31/97

813-536-6143

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

0067063

CR2E037 (9/96)