## FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

**FILED** 

Feb 13 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 711165

(1)

KIWANIS CLUB OF DELTONA, FLORIDA, INC.

Principal Place	e of Business	Mailing Address	Mailing Address						
GEORGE DYE GEORGE DYE									
541 BELLTOWE	R AVENUE	541 BELLTOWER AVENUE							
DELTONA FL 3	2725-8061	DELTONA FL 32725-8061 US				3. Date Incorporated or Qualified	3a. Date of La	st Report	
US					07/11/1966	01/25/			
<u></u>	lace of Business	2a. Mailing Address				4. FEI Number FO. 0104676		Applied For	
21		26				59-6164576		Not Applicable	
22 Suite, Apr.	#, etc.	Suite, Apt. #, etc.				5. Certificate of Status Desired	4	75 Additional e Required	
City & State	6	City & State				6. Election Campaign Financing			
23		28				6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees			
Zip	Country	Zip	Cour	itry		8. This corporation has liability for in			
24	25		30			Florida Statutes	Yes No		
	9. Name and Address of Curren	t Registered Agent				10. Name and Address of New Reg	istered Agent		
				81 Nan	ne				
GEORGE DYE				B2 Stre	et Addres	ss (P.O. Box Number is Not Acceptable	e)	***************************************	
	LTOWER AVENUE				<del></del>				
DELTON	IA FL 32725		ľ	B3					
				84 City	<del></del>	· · · · · · · · · · · · · · · · · · ·	FL 85	Zip Code	
11. Pursuant	to the provisions of Sections 617.050:	2 and 617.1508, Florida Statutes	s, the ab	ove-nam	ed corpor	ration submits this statement for the pun's board of directors. I hereby accept		ng its registered	
office or r agent. I a	egistered agent, or both, in the State im familiar with, and accept the obliga	of Florida. Such change was au ations of, Section 617.0503, Flor	ithorized ida Statu	by the c ites.	orporatio	n's board of directors. I hereby accept	the appointmen	t as registered	
SIGNATURE	•								
	Signature, typed or printed name of registered age			Agent signs	beriuper erui	when reinstating)	DATE		
12.	OFFICERS AND	DELETE	13.	r		ADDITIONS/CHANGES TO OFFICE			
NAME	CRAVER, DONALD	- percit					∟ Char	nge L Addition	
STREET ADDRESS	0000 W D 100 W 070W DD			1.2 NAME 1.3 STREET ADDRESS					
CITY-ST-ZIP	DELTONA FL				<b>»</b>				
TITLE	D	DELETE	2.1 TIT	Y-ST-21P .F			☐ Char	nge Addition	
NAME	EUVERARD, WILL		2.2 NAI					7,00	
STREET ADDRESS	2182 HAINLIN CT			 Ieet adores	s		•		
CITY-ST-ZIP	DELTONA,F L 00000			Y-ST-ZIP	~				
TITLE	P	DELEYE	3,1 TIT		Pa	0	M. Char	nge Addition	
NAME	GEORGE DYE		3.2 NAI	VIE.	K	DY GWALTNEX DAY SWOOK DEIVE LTONA-FL 32725			
STREET ADDRESS	541 BELLTOWER AVENUE		3.3 STF	EET ADDRES	s   20	LITALIA CI ~~~?			
CITY-ST-ZIP	DELTONA FL			Y-ST-ZIP	N/C	CICIONAL 3 2/23			
TITLE	SD	DELETE	4.1 TIT		a		Char	nge Addition	
NAME	JONES, HORACE		4. 2 NA	ME	De	MES HORACE	•		
STREET ADDRESS	1380 WOODBINE AVE		4.3 STF	IEET ADDRES	s   13	BO MOODBINE -			
CITY-ST-ZIP	DELTONA FL		4.4 CIT	Y-ST-ZIP	De	EUTONA-FT 32725			
TITLE	D	DELETE	5.1 TIT			· · · · · · · · · · · · · · · · · · ·	☐ Char	nge Addition	
NAME	ebert, arthur		5.2 NAI	ИE					
STREET ADDRESS	960 DELTONA BLVD		5.3 STF	EET ADDRES	s		••		
CITY-ST-ZIP	DELTONA, FL 00000		5.4 CIT	Y-ST-ZIP					
TITLE	Р	DELETE	6.1 TIT		5		🔀 Char	nge Addition	
NAME	LEVEILLE, DONALD	/	6.2 NAI	ME	4H	RRY FAUBER 1E. NORMANDY E	21		
STREET ADDRESS	416 S BOUNDARY AVE			EET ADDRES	רֹר וֹ	IE NORMANDY	3(,		
OTV OT 700	DELAND EL		0.4017			EL TAKA (1. 2772	5		

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 mediachment with an address.

SIGNATURE:

ANN TYPED OF PRINTED AME OF SIGNING OFFICED OF DIRECTOR