SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998. AMOUNT DUE ON OR BEFORE 09/30/98: \$61.25 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$236.25).

NONPROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 715039

(4)

## FILED Aug 19 1998 8:00am Secretary of State

5/11/98 407-783-0297
Date . Dayline Phone #

KENNEDY COLUMBIAN CLUB, INC.								
Principal Place of Business			Malling Address					(0)1 <b>010</b> 11 01011 81011 01011 01011 1001
4410 N. BANANA RIVER DR. P.O. BOX 321571 COCOA BEACH FL 32931			4410 N. BANANA RIVER DR. P.O. BOX 321571 COCOA BEACH FL 32832-1571				3. Date Incorporated or Qualified 07/31/1968 4. FEI Number	Applied For
US			US				23-7372952	Not Applicable
2. Principa 21	al Place of Business	H	2a. Malling Address			~	5. Certificate of Status Desired	
Sulte, Apt. #, etc.			Suite, Apt. #, etc.				6. Election Campaign Financing	\$5.00 May Be
22			27				Trust Fund Contribution	Added to Fees
City & State			City & State				7. Is this nonprofit corporation a homeo	
23 Zip	Zip Country		Zip Country			,	Ŭ Ye:	
24	25		29 30			ı	<ol><li>This corporation owes or has paid the Personal Property Tax due June 30.</li></ol>	e current year Intangible Yes X No
£4;		ddress of Current Re					10. Name and Address of New Registe	
					81	Name	•	Non France
MARKOSKY, FRANSIS H					82	Street Add	Iress (P.O. Box Number Is Not Acceptable)	
1525 MINUTEMAN CSWY #103					63	<del></del>		<del></del>
CUCUA	A BEAOH FL 32931				اتتا			
<u>.</u> <u></u> ,					84			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								
					13.		ADDITIONS/CHANGES TO OFFICER	
TITLE	D			DELETE	1.1 TITLE			Change Addition
NAME	GRANZULIS, ART		•		1.2 NAME			
STREET ADDRE	715 52 5111 5215			1.3 ST		T ADDRESS		
CITY-ST-ZIP	CAPE CANAVAL	FL			1.4 CITY-ST	r-zip		
TITLE	D DAVA	1010	L. □	DELETE 2.1 TITLE				Change Addition
NAME STOCET ADDDE	LANDMAN, RAYMOND			2.2 NA				
STREET ADDRE	SS 1735 RICHARDSON RD. MERRITT ISLAND FL				2.3 STREET	1		
CITY-ST-ZIP TITLE	D WENNIT ISLAND	/ FL		2.4 CI		í-ZIP		
NAME	RYAN, RICHARD		□ υ	DELETE 3.1 TIT				Change Addition
STREET ADDRE						ADDRESS		
CITY-ST-ZIP	COCOA FL 3292				3.4 CITY-ST			
TITLE	TD				4.1 TITLE			Change Addition
NAME	MARKOSKY, FRA	ANCIS H	<u> </u>		4.2 NAME			
STREET ADDRE					4.3 STREET	ADDRESS		
CITY-ST-ZIP	COCOA BEACH I	FL 32931			4.4 CITY-ST-	r-zip .		
TITLE	PO		D	ELETE	5.1 TITLE			Change Addition
NAME	WATSON, REDMO				5.2 NAME			
STREET ADORE	1000 000 000				5.3 STREET	ADDRESS		
CITY-ST-ZIP	COCOA BEACH I	<u>FL</u>			5.4 CITY-ST-	-ZiP		
TITLE	D AAADDEAL JOURN		∐ D′	,	6.1 TITLE			Change Addition
NAME OTDEET ADDOC	MADDEN, JOHN	^ 4F 400			6.2 NAME			
STREET ADDRESS 1595 N ATLANTIC AE 109 CITY-ST-ZIP COCOA BEACH FL				1	6.3 STREET			•
14. 1 hereby	v certify that the informat	tion supplied with this	filing does not a	alify for the ex	6.4 CITY-ST-	stated in sec	ction 119 07/3/(i) Florida Statutos I further on	rtifu that the Information
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.								

NAME OF BIGNING OFFICER OR DIRECTOR