


FILE NOW: FILING FEE IS \$61.25

FILED  
Aug 26 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
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**DOCUMENT # 719186 (9)**

1. Corporation Name  
**KIWANIS CLUB OF JUPITER-TEQUESTA, INCORPORATED**



Principal Place of Business <b>P.O. BOX 4144 TEQUESTA FL 33469</b>	Mailing Address <b>P.O. BOX 4144 TEQUESTA FL 33469</b>
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3. Date Incorporated or Qualified <b>08/25/1970</b>	Applied For <input type="checkbox"/> Yes <input type="checkbox"/> Not Applicable
4. FEI Number <b>59-6151464</b>	Applied For <input type="checkbox"/> Yes <input type="checkbox"/> Not Applicable
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 Fee</b>	
7. Is this nonprofit corporation a homeowners association? <input type="checkbox"/> Yes <input 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 type="checkbox"/> No	

2. Principal Place of Business <b>21</b>	2a. Mailing Address <b>26</b>
Suite, Apt. #, etc. <b>22</b>	Suite, Apt. #, etc. <b>27</b>
City & State <b>23</b>	City & State <b>28</b>
Zip <b>24</b>	Country <b>25</b>
Zip <b>29</b>	Country <b>30</b>

9. Name and Address of Current Registered Agent

**MALLORY, EARL K  
675 WEST INDIANTOWN ROAD  
SUITE 103  
JUPITER FL 33458**

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>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 <b>P</b>	<input checked="" type="checkbox"/> DELETE	1.1 TITLE <b>President</b>	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME <b>WERNER, HOWARD C</b>		1.2 NAME <b>Mike Phillips</b>	
STREET ADDRESS <b>632 #6 EASTWIND DR.</b>		1.3 STREET ADDRESS <b>17982 Anchor Dr</b>	
CITY-ST-ZIP <b>NORTH PALM BEACH FL</b>		1.4 CITY-ST-ZIP <b>Jupiter FL 33458</b>	
TITLE <b>VPD</b>	<input checked="" type="checkbox"/> DELETE	2.1 TITLE <b>President, Elect</b>	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME <b>PACIOCCO, ANDREW</b>		2.2 NAME <b>Earl Mallory</b>	
STREET ADDRESS <b>309 ROBBET PARK CIRCLE #309</b>		2.3 STREET ADDRESS <b>675 West Indiantown Rd #103</b>	
CITY-ST-ZIP <b>PALM BEACH GARDENS FL</b>		2.4 CITY-ST-ZIP <b>Jupiter FL 33458</b>	
TITLE <b>VPD</b>	<input type="checkbox"/> DELETE	3.1 TITLE <b>Vice President</b>	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME <b>PHILLIPS, MIKE</b>		3.2 NAME <b>Debbie Hagen</b>	
STREET ADDRESS <b>17982 ANCHOR DR</b>		3.3 STREET ADDRESS <b>431 Jupiter Lakes Blvd #211B</b>	
CITY-ST-ZIP <b>JUPITER FL</b>		3.4 CITY-ST-ZIP <b>Jupiter FL 33458</b>	
TITLE <b>T</b>	<input checked="" type="checkbox"/> DELETE	4.1 TITLE <b>Treasurer</b>	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME <b>KEELOR, MARY L</b>		4.2 NAME <b>Steve Pullon</b>	
STREET ADDRESS <b>235 E. RIVER PARK DR.</b>		4.3 STREET ADDRESS <b>233 US 25</b>	
CITY-ST-ZIP <b>JUPITER FL</b>		4.4 CITY-ST-ZIP <b>Tequesta, FL 33469</b>	
TITLE <b>S</b>	<input checked="" type="checkbox"/> DELETE	5.1 TITLE <b>Secretary</b>	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME <b>CARUTHERS, KAREN C</b>		5.2 NAME <b>Jane Johnston</b>	
STREET ADDRESS <b>8448 SE COCONUT ST.</b>		5.3 STREET ADDRESS <b>11291 SE 171 St</b>	
CITY-ST-ZIP <b>HOBE SOUND FL</b>		5.4 CITY-ST-ZIP <b>Jupiter, FL 33469</b>	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

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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 \_\_\_\_\_

CR2E037 (10/97)

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Florida Department of State  
Division of Corporations  
PO Box 1500  
Tallahassee, FL 32302-1500

August 12, 1998

Kiwanis of Jupiter-Tequesta  
PO Box 4144  
Tequesta, FL 33469

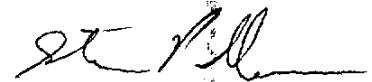
Dear sir,

Below please find a list of directors for our club as requested by your letter:

1. Kelli Trotta  
7 Tradewinds Circle  
Tequesta, FL 33469
2. Howard Werner  
536 Eastwind Dr. #6  
N. Palm Beach, FL 33408
3. Judy Monteiro  
19895 Earlwood Dr.  
Jupiter, FL 33458
4. August LaRuffa  
13210 Crisa Dr.  
Jupiter, FL 33477
5. Don Windmill  
3900 County Line Rd. #22A  
Tequesta, FL 33469

Please contact us if you need additional information.

Sincerely,



Steven T. Pullon  
treasurer