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Secretary of State

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NONPROFIT CORPORATION ANNUAL REPORT 1999		FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # 723862

1. Corporation Name

CIVITAN CLUB OF SOUTHBORO, FLORIDA, INC

Principal Place of Business

3200 SUMMIT BLVD
P O BOX 18892
WEST PALM BEACH FL 33416-5892

Mailing Address

3200 SUMMIT BLVD
P O BOX 18892
WEST PALM BEACH FL 33416-5892



2. Principal Place of Business

21 Suite, Apt. #, etc.

23 City & State

24 Zip

25 Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

29 Country

3. Date Incorporated or Qualified

04/02/1972

4. FEI Number

59-1412347

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be Added to Fees

9. Name and Address of Current Registered Agent

ARTHUR D. LARANGE
2308 LYNN DRIVE
WEST PALM BEACH FL 33415

10. Name and Address of New Registered Agent

81 Name **JUNE HOUGHTALING**
82 Street Address (P.O. Box Number is Not Acceptable) **4584 24th PLACE South**
83
84 City **West Palm Beach FL** 85 Zip Code **33415**

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

June Houghtaling

(NOTE: Registered Agent signature required when reinstating)

DATE

1/19/99

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

NAME **PD HOUGHTALING, JUNE**
STREET ADDRESS **4584 24TH PL S.**
CITY-ST-ZIP **WEST PALM BCH FL**

TITLE ☒ DELETE

NAME **SD PURCELL, SALLY**
STREET ADDRESS **91 W. PINETREE AVE.**
CITY-ST-ZIP **LAKE WORTH FL**

TITLE ☐ DELETE

NAME **TD DUNN, RICHARD**
STREET ADDRESS **1847 BARTLETT CT.**
CITY-ST-ZIP **LAKE CLARKE SHORES FL**

TITLE ☐ DELETE

NAME **D RENEAU, JAMES**
STREET ADDRESS **295 W. SHADYSIDE CIR.**
CITY-ST-ZIP **WEST PALM BCH FL**

TITLE ☐ DELETE

NAME **D LARANGE, DIANE**
STREET ADDRESS **1835 WOODHAVEN DRIVE**
CITY-ST-ZIP **WEST PALM BEACH FL**

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☒ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

SD LIMA Roberta
3348 Sierra Drive
Lake Worth FL 33461

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, with all other like empowered.

SIGNATURE:

Richard Dunn
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-19-99
Date

(561) 964-5777
Daytime Phone #

CR2E037 (11/98)