FILE NOW: FILING FEE AFTER MAY 1 IS $155.00

APPROVED AND FILED

95 APR 18 PM 11:00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CORPORATION ANNUAL REPORT
1995

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

DOCUMENT # 741574 (8)

1. Corporation Name

KIWANIS CLUB OF TOP OF THE WORLD, CLEARWATER, FL ORIDA, INC.

DO NOT WRITE IN THIS SPACE

Principal Place of Business	Mailing Address
2440 WORLD PARKWAY BLVD #16 CLEARWATER FL 34623	2440 WORLD PARKWAY BLVD #16 CLEARWATER FL 34623

3. Date Incorporated or Qualified: 02/09/1978
3a. Date of Last Report: 06/20/1994
4. FEI Number: 59-1704485 ☐ 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
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status ☒ **$68.75** Supplemental Fee Not Required
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☐ No

2. Principal Place of Business	2a. Mailing Address
21 2069 World Parkway	26 2431 Franciscan Dr.
22 Suite, Apt. #, etc.	27 Apt 59
23 City & State: Clearwater, Fl.	28 City & State: Clearwater, Fl
24 Zip: 34623 25 Country	29 Zip: 34623 30 Country

9. Name and Address of Current Registered Agent	10. Name and Address of New Registered Agent
ARFKEN, GEORGE 2440 WORLD PARKWAY #16 CLEARWATER FL 34623	81 Name: McDonald, Thomas 82 Street Address (P.O. Box Number is Not Acceptable): 2431 Franciscan Dr. 83 Apt 59 84 City: Clearwater FL 85 Zip Code: 34623

11. Pursuant to the provisions of Sections 607.0302 and 607.1508, 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 607.0505, Florida Statutes.

SIGNATURE: Thomas McDonald DATE: 3-28-95
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S HOGAN, ERNIE ~~2202 SWEDISH DR., #38~~ CLEARWATER FL	1.1 TITLE / 1.2 NAME / 1.3 STREET ADDRESS / 1.4 CITY-ST-ZIP	☒ Change ☐ Addition 1099 McMullen Booth Rd Clearwater, Fl 34619
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D KEMPER, FRANCES 2363 IGEAELI DR., #51 CLEARWATER, FL 00000	2.1 TITLE / 2.2 NAME / 2.3 STREET ADDRESS / 2.4 CITY-ST-ZIP	☒ Change ☐ Addition D Kemper, Frances 2363 Israeli Dr. #51 Clearwater, Fl 34623
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P TUCKER, STANLEY 2427 FINLANDIA, #23 CLEARWATER FL	3.1 TITLE / 3.2 NAME / 3.3 STREET ADDRESS / 3.4 CITY-ST-ZIP	☒ Change ☐ Addition P Santangelo, Nicoles C. 2440 World Parkway Apt 50 Clearwater, Fl 34623
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T ARFKEN, GEORGE 2440 WORLD PARKWAY #16 CLEARWATER, FL 00000	4.1 TITLE / 4.2 NAME / 4.3 STREET ADDRESS / 4.4 CITY-ST-ZIP	☒ Change ☐ Addition T McDonald, Thomas 2431 Franciscan Dr Apt 59 Clearwater, Fl 34623
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D BOGAN, CHRIS 2285 ISRAELI DRIVE #41 CLEARWATER, FL 00000	5.1 TITLE / 5.2 NAME / 5.3 STREET ADDRESS / 5.4 CITY-ST-ZIP	☒ Change ☐ Addition D Sindoni, Joe 2361 Ecuadorian Way Clearwater, Fl 34623
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D WALTON, WALT 2441 PERSIAN DRIVE, #19 CLEARWATER FL	6.1 TITLE / 6.2 NAME / 6.3 STREET ADDRESS / 6.4 CITY-ST-ZIP	☒ Change ☐ Addition D Walton, Walt 2441 Persian Dr. #19 Clearwater, Fl 34623

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and 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: Thomas McDonald Thomas McDonald 3-28-95 (813) 799-2235
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

000000