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Apr 08 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **743333** (7)

1. Corporation Name

KIWANIS CLUB OF GREATER ORANGE PARK, INC.



Principal Place of Business P.O. BOX 164 ORANGE PARK FL 32067	Mailing Address P.O. BOX 164 ORANGE PARK FL 32067
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3. Date Incorporated or Qualified
06/20/1978

4. FEI Number
59-2151333

Applied For
Not Applicable

2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip 24 Country	2a. Mailing Address 25 Suite, Apt. #, etc. 26 City & State 27 Zip 28 Country
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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. Is this nonprofit corporation a homeowners association? ☐ Yes ☒ No

8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**ORREN, ROY H
2851 MARION CT. W.
ORANGE PARK FL 32073**

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City 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

12. OFFICERS AND DIRECTORS	
TITLE	D <input type="checkbox"/> DELETE
NAME	ORREN, ROY H
STREET ADDRESS	2851 MARION CT. W.
CITY-ST-ZIP	ORANGE PARK FL 32073
TITLE	P <input type="checkbox"/> DELETE
NAME	WALKER, ROSALYN
STREET ADDRESS	294 BONNLYN DRIVE
CITY-ST-ZIP	ORANGE PARK FL
TITLE	D <input checked="" type="checkbox"/> DELETE
NAME	ORREN, CAROL
STREET ADDRESS	2851 MARION CT WEST
CITY-ST-ZIP	ORANGE PARK FL
TITLE	S <input checked="" type="checkbox"/> DELETE
NAME	CHRISTIENSEN, CHRIS
STREET ADDRESS	14 FOX VALLY DRIVE.
CITY-ST-ZIP	ORANGE PARK FL 32073
TITLE	D <input type="checkbox"/> DELETE
NAME	MIDDLEMAS, TODD
STREET ADDRESS	189 VANDERFORD ROAD WEST
CITY-ST-ZIP	ORANGE PARK FL 32073
TITLE	T <input checked="" type="checkbox"/> DELETE
NAME	WARD, TOM
STREET ADDRESS	525 COPPITT DR. SOUTH
CITY-ST-ZIP	ORANGE PARK FL 32073

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	D <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
3.2 NAME	Witte, Steven
3.3 STREET ADDRESS	1558 Dolphin Ct.
3.4 CITY-ST-ZIP	Orange Park, FL 32073
4.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
4.2 NAME	Mackin, Tom
4.3 STREET ADDRESS	2700 Country Club Blvd.
4.4 CITY-ST-ZIP	Orange Park, FL 32073
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
6.2 NAME	Aiosa, Douglas
6.3 STREET ADDRESS	1313 Cutlass Rd
6.4 CITY-ST-ZIP	Orange Park, FL 32065

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: *Douglas R. Aiosa* *4/2/98* *904-636-0032*

CR2E037 (10/97)