

FILE NOW: FILING FEE IS \$61.25

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SECRETARY OF STATE
TALLAHASSEE FLORIDA



**NONPROFIT
CORPORATION
ANNUAL REPORT
1996**



FLORIDA DEPARTMENT OF
REVENUE
DIVISION OF CORPORATIONS

DOCUMENT # 747703 (7)
1. Corporation Name
KIWANIS CLUB OF ST. JAMES CITY, FLORIDA, INC.

Principal Place of Business Mailing Address
**8150 STRINGFELLOW RD
PO BOX 111
ST. JAMES CITY FL 33956**

3. Date Incorporated or Qualified **06/18/1979** 3a. Date of Last Report **05/01/1995**
4. FEI Number **59-2372860** 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**
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 Suite, Apt. #, etc. **26** Suite, Apt. #, etc.
22 City & State **27** City & State
23 Zip **28** Zip
24 Country **25** Country **29** Country **30** Country

9. Name and Address of Current Registered Agent

**JOHNSON, KARL L
2701 CLEVELAND AVE., SUITE 10
FT MYERS FL 33901**

10. Name and Address of New Registered Agent

81 Name **4000002341944--9**
82 Street Address (P.O. Box Number is Not Acceptable) **11/07/97--01102--001**
83 *******61.25 *****61.25**
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	P	☐ DELETE
NAME	SHEVLIN, MICHAEL	
STREET ADDRESS	P O BOX 256 N/A	
CITY-ST-ZIP	PINELAND FL	
TITLE	PE	☐ DELETE
NAME	WZOLEK, WALT	
STREET ADDRESS	2825 TERN CORUT	
CITY-ST-ZIP	ST. JAMES CITY FL	
TITLE	T	☐ DELETE
NAME	BARBE, LINDA	
STREET ADDRESS	317 SE 17TH AVE	
CITY-ST-ZIP	CAPE CORAL FL	
TITLE	D	☐ DELETE
NAME	AMT, HANK	
STREET ADDRESS	7981 DELLA BIITA	
CITY-ST-ZIP	BOKEELIA FL	
TITLE	D	☐ DELETE
NAME	DEFUNIAK, H. R.	
STREET ADDRESS	P.O. BOX 795 N/A	
CITY-ST-ZIP	ST. JAMES CITY FL	
TITLE	D	☐ DELETE
NAME	DAHLBERG, DALE	
STREET ADDRESS	4974 NEEDLE FISH LANE	
CITY-ST-ZIP	ST. JAMES CITY FL	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	PRESIDENT	☒ Change ☐ Addition
1.2 NAME	WALT WSZOLEK	
1.3 STREET ADDRESS	2825 TERN CT	
1.4 CITY-ST-ZIP	ST JAMES CITY FL 33956	
2.1 TITLE	PE	☒ Change ☐ Addition
2.2 NAME	THOMAS GUESS	
2.3 STREET ADDRESS	1425 SE 30TH ST	
2.4 CITY-ST-ZIP	CAPE CORAL, FL 33904	
3.1 TITLE	T	☒ Change ☐ Addition
3.2 NAME	DALE DAHLBERG	
3.3 STREET ADDRESS	4974 NEEDLEFISH LN	
3.4 CITY-ST-ZIP	ST JAMES CITY FL 33956	
4.1 TITLE	D	☒ Change ☐ Addition
4.2 NAME	MARY HAGAN	
4.3 STREET ADDRESS	15664 BROMELIAD RD	
4.4 CITY-ST-ZIP	BOKEELIA FL 33922	
5.1 TITLE	D	☒ Change ☐ Addition
5.2 NAME	Theodore Mott	
5.3 STREET ADDRESS	4940 GULFGATE LN	
5.4 CITY-ST-ZIP	ST JAMES CITY FL 33956	
6.1 TITLE	D	☒ Change ☐ Addition
6.2 NAME	SKIP SCHWARTZ	
6.3 STREET ADDRESS	2673 8th AVE	
6.4 CITY-ST-ZIP	ST JAMES CITY FL 33956	

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)(k), 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 E Guess Jr* **THOMAS E GUESS JR** **2/23/96**

CR2E037 (12/95)