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Jan 20 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 # 751698 (2)
 1. Corporation Name
THE KIWANIS CLUB OF WINTER PARK FOUNDATION, INC.



Principal Place of Business 872 GRANVILLE DR. (ZIP 32789) PO BOX 1573 WINTER PARK FL 32790		Mailing Address 872 GRANVILLE DR. (ZIP 32789) PO BOX 1573 WINTER PARK FL 32790		3. Date Incorporated or Qualified 03/25/1980
2. Principal Place of Business		2a. Mailing Address		4. FEI Number 59-2207122
21	Suite, Apt. #, etc.	26	Suite, Apt. #, etc.	5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required
22	City & State	27	City & State	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees
23	Zip	28	Country	7. Is this nonprofit corporation a homeowners association? <input type="checkbox"/> Yes <input type="checkbox"/> No
24	Country	29	Zip	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

9. Name and Address of Current Registered Agent		10. Name and Address of New Registered Agent	
SMITH, DANIEL B 1605 ASHER LANE ORLANDO FL 32803		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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	P	1.1 TITLE	DEES. THERESA ODEN
NAME	BRUCE, ROBERT	1.2 NAME	3251 OAK LANE PLACE
STREET ADDRESS	512 ST. DUNSTAN WAY	1.3 STREET ADDRESS	WINTER PARK, FL 32790
CITY-ST-ZIP	WINTER PARK FL	1.4 CITY-ST-ZIP	
TITLE	VP	2.1 TITLE	VP
NAME	GIBSON, ORTEN	2.2 NAME	MARLAND P. HOWARD
STREET ADDRESS	624 FITZWALTER DR.	2.3 STREET ADDRESS	8750 HARBORVIEW DRIVE
CITY-ST-ZIP	WINTER PARK FL	2.4 CITY-ST-ZIP	ORLANDO, FL 32819
TITLE	SD	3.1 TITLE	
NAME	SMITH, DANIEL	3.2 NAME	
STREET ADDRESS	1605 ASHER LANE	3.3 STREET ADDRESS	
CITY-ST-ZIP	ORLANDO FL	3.4 CITY-ST-ZIP	
TITLE	TD	4.1 TITLE	
NAME	OTTINGER, J. ROBERT	4.2 NAME	
STREET ADDRESS	872 GRANVILLE DR.	4.3 STREET ADDRESS	
CITY-ST-ZIP	WINTER PARK FL	4.4 CITY-ST-ZIP	
TITLE	D	5.1 TITLE	
NAME	BRUCE, ELOISE	5.2 NAME	
STREET ADDRESS	512 ST. DUNSTAN WAY	5.3 STREET ADDRESS	
CITY-ST-ZIP	WINTER PARK FL	5.4 CITY-ST-ZIP	
TITLE	D	6.1 TITLE	
NAME	HILL, GEORGE F. J	6.2 NAME	
STREET ADDRESS	2120 FORREST DR.	6.3 STREET ADDRESS	
CITY-ST-ZIP	WINTERPARK FL	6.4 CITY-ST-ZIP	

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: [Signature] 1/8/98 407-644-5451
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E037 (10/97)