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NONPROFIT  
CORPORATION  
ANNUAL REPORT  
**1999**



FLORIDA DEPARTMENT OF STATE  
**Katherine Harris**  
Secretary of State  
DIVISION OF CORPORATIONS

**FILED**  
**Mar 03, 1999 8:00 am**  
**Secretary of State**

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**DOCUMENT # 761813**

1. Corporation Name

**KIWANIS CLUB OF PABLO, JACKSONVILLE BEACHES, INC**

Principal Place of Business

**1600 SHETTER AVE.  
JACKSONVILLE BCH. FL 32250**

Mailing Address

**95 ANCILLA CT.  
PONTE VEDRA BCH. FL 32082**



2. Principal Place of Business

2a. Mailing Address

**21** Suite, Apt. #, etc.

**26** **P.O. Box 50503**

3. Date Incorporated or Qualified

**02/09/1982**

**22** City & State

**27** Suite, Apt. #, etc.

4. FEI Number

**51-0245558**

Applied For

Not Applicable

**23** City & State

**28** City & State

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

**24** Zip

**25** Country

**29** Zip

**30** Country

6. Election Campaign Financing  
Trust Fund Contribution ☐

**\$5.00** May Be  
Added to Fees

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**GESSELL, LYMAN  
95 ANCILLA CT.,  
PONTE VEDRA BCH. FL 32082**

**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

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	DELETED
T	HAMILTON, GEORGE	1412 PINWOOD ROAD	JAX BEACH, FL 00000 32250	<input type="checkbox"/>
S	GESSELL, LYMAN E	95 ANCILLA CT	PONTE VEDRA BCH FL 32250	<input checked="" type="checkbox"/>
P	THORNTON, GERTRUDE L	39 FAIRWAY LANE	JACKSONVILLE FL 32250	<input checked="" type="checkbox"/>
D	ZAZZARINO, EDWARD	1895 HICKORY LANE	ATLANTIC BEACH FL 32233	<input type="checkbox"/>
D	FREER, PATRICIA	2100 DR. S. #5A	JAX BEACH FL 32250	<input type="checkbox"/>
D	WHYTE, ROBERT B	1829 ARDEN WAY	JAX BEACH FL 32250	<input checked="" type="checkbox"/>

1.1 TITLE	1.2 NAME	1.3 STREET ADDRESS	1.4 CITY-ST-ZIP	Change	Addition
2.1 TITLE	2.2 NAME	2.3 STREET ADDRESS	2.4 CITY-ST-ZIP	<input checked="" type="checkbox"/>	<input type="checkbox"/>
3.1 TITLE	3.2 NAME	3.3 STREET ADDRESS	3.4 CITY-ST-ZIP	<input checked="" type="checkbox"/>	<input type="checkbox"/>
4.1 TITLE	4.2 NAME	4.3 STREET ADDRESS	4.4 CITY-ST-ZIP	<input type="checkbox"/>	<input type="checkbox"/>
5.1 TITLE	5.2 NAME	5.3 STREET ADDRESS	5.4 CITY-ST-ZIP	<input type="checkbox"/>	<input type="checkbox"/>
6.1 TITLE	6.2 NAME	6.3 STREET ADDRESS	6.4 CITY-ST-ZIP	<input type="checkbox"/>	<input type="checkbox"/>

**FRED H. KING**  
**600 PINE STREET**  
**NEPTUNE BEACH, FL. 32266**

**DARRELL D. HILLIKER**  
**3793 Union Pacific DR. E**  
**JACKSONVILLE, FL. 32216**

**BURT VAN WAGNER**  
**1838 Cardinal CT.**  
**JACKSONVILLE BEACH FL. 32250**

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:

SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/22/99

(904) 246-0407

Date

Daytime Phone #

CR2E037 (11/98)