## FILE NOW: FILING FEE IS \$61.25

, NONPROFIT CORPORATION **ANNUAL REPORT** 



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

1996 DOCUMENT # 764794

(4)

THE CIVITAN CLUB OF ST. PETERSBURG, INC.

- I - I - I	/ D. ciones	Mailing Address			
Pariticipal Flade of Boshicos					
P.O. BOX 10094 ST. PETERSBURG FL 33733-0094		P.O. BOX 10094 St. Petersburg fl 3:	P.O. BOX 10094 ST. PETERSBURG FL 33733-0094		
				3. Date Incorporated or Qualified 09/01/1982	3a. Date of Last Report 03/24/1995
2. Principal Plac	ce of Business	2a. Mailing Address		4. FEI Number 59-6134180	Applied For Not Applicable
Suite, Apt. #	, etc.	26 Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State		City & State		6. Election Campaign Financing	\$5.00 May Be
23		28		Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Country	This corporation has liability for in Florida Statutes	
24	9. Name and Address of Curre	29 ant Registered Agent	30	10. Name and Address of New Ro	
	9. Name and Address of Curr	Bill Ushistelen Whom	81 Name	T 0 1100000	
MANDEDE	BLEEK, JACK		82 Street		e)
272 NE P	NAYVIEW DR		177	6 Lawrence Drive	
ST PETE	RSBURG FL 33704		83		!
. 0, 12,2,	TODO! TO TO TO TO		84 Ciba (		85 Zio Code
·				inater	FL 34619
11. Pursuant to	o the provisions of Sections 617.05	502 and 617.1508, Florida Statu orida, Such change was authori	tes, the above-named corp zed by the corporation's be	poration submits this statement for the pur pard of directors. I hereby accept the appx of ASVPEC	bintment as registered agent. I am
familiar wit	h, and accept the obligations of S	Ltion 617.0503, Florida Statute	Tropposi TO	EASUREC	4/29/96
SIGNATURE	Signature, typed printed name of registered ag	worn JAMESY	CTE Registered Agent signature requ	ured when reinstating)	DATE
12.		AND DIRECTORS	13.	ADDITIONS/CHANGES TO OFF	
TITLE	VP	DELETE	1 1 TITLE	VP ~	Change Addition
NAME	CARD, JOSEPH M.	. • • • • • • • • • • • • • • • • • • •	1.2 NAME (	EVRITS THOMAS	
STREET ADDRESS	6505 ALOHA DR		1.3 STREET ADDRESS	391 14/ST STN	
CITY-ST-ZIP	ST PETERSBURG FL		1.4 CITY - ST - ZIP	SEMINOLE, FL 34646	Change Addition
TITLE	D	☐ DELETE	21 TITLE		Collarige D Addition
NAME	RESOP, PAUL		2 2 NAME		
STREET ADDRESS	9425 BLIND PASS RD 608		2 3 STREET ADDRESS		
CITY-ST-ZIP	ST PETERSBURG BCH FL	DELETE	2 4 C/TY - ST - Z/P 3 1 T/T/LE		Change Addition
TITLE	S DOME LOSEOUE	A Detter	32 NAME	Richard Keating	~ ~
NAME	BOYLE, JOSEPH F. 5575 GULF BLVD		3 3 STREET ADORESS	2830 ALTON DRIVE	
STREET ADDRESS	ST PETERSBURG FL		3.4 CITY-ST-ZIF	ST PETEREACH 3370	
TITLE	T	DELETE	4.1 TITLE	consumos de co	Change Addition
NAME	PATTERSON, JAMES		4 2 NAME	9000018 -05/29/9601	₩3163 ((00)
STREET ADDRESS	9145 PELICAN LANDING B	LVD #614	4.3 STREET ADDRESS	***81.25	115021
CITY-ST-ZIP	CLEARWATER FL		4.4 CITY - ST - ZIP		Chance Addition
TITLE	٧	DELETE	51 TITLE	V	Change
NAME	COUTURE, THOMAS L	/\	5.2 NAME	TOM BRODERICK	
STREET ADDRESS	7000 BLIND PASS RD		5 3 STREET ADDRESS	3925 QUEEN STN	214
CITY-ST-ZIP	ST PETERSBURG BCH FL	100	5 4 CITY - ST - ZIF	ST. PETERSBARD, FL 33	
TITLE	D	DELETE	61 TITLE	Jack Vanderbleek	Change
NAME	WEDDLE, CHARLES E.		62 NAME	DACK VAVIOUR DECK	
STREET ADDRESS	3948 NE 14 WAY		6.3 STREET ADDRESS	273 NE BANJEW DR ST. PETERSBURG FL 3.	3704

ST PETERS BURG FL

14. I do hereby cortrly that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119/73/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 chapted, or on an attachment with an address.

SIGNATURE:

SIGNATURE

ST. PETERS BURG, FL 33/70/4

ST.

CR2E037 (12/95)