

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 26, 2004 8:00 am
Secretary of State

02-26-2004 90023 012 ****61.25

DOCUMENT # 768744

1. Entity Name

KIWANIS CLUB OF GRACEVILLE, FLORIDA, INC.



Principal Place of Business

P.O. BOX 591
GRACEVILLE FL 32440
US

Mailing Address

P.O. BOX 591
GRACEVILLE FL 32440
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

51-0245573

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

WILLIAMS, MARTHA
1242 KEVIN RD
GRACEVILLE FL 32440

7. Name and Address of New Registered Agent

Name

Carolyn Wicksell

Street Address (P.O. Box Number is Not Acceptable)

1070 8th Ave

City

Graceville

FL

Zip Code

32440

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25
Due By May 1, 2004

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Florida Department of State

10. OFFICERS AND DIRECTORS

T
TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
WATFORD, DAVID
5359 CEILEY ST.
GRACEVILLE FL 32440 ☐ Delete

VP
TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
OBAR, ARTHUR
1094 WHITE AVE
GRACEVILLE FL 32440 ☐ Delete

S
TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
WEKSELL, CAROLYN
1070 8TH AVE.
GRACEVILLE FL 32440 ☐ Delete

P
TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
OBAR, ARTHUR
1094 WHITE AVE.
GRACEVILLE FL 32440 ☒ Delete

D
TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
PADGETT, CHESTER
933 12TH AVE
GRACEVILLE FL 32440 ☒ Delete

D
TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
JACKSON, CECIL
5390 BROWN ST
GRACEVILLE FL 32440 ☒ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

David Watford ☒ Change ☐ Addition
TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
5365 Cherry St
Graceville FL 32440

☐ Change ☐ Addition
TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

Carolyn Wicksell ☒ Change ☐ Addition
TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

President ☒ Change ☐ Addition
TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
William Long
5429 College Dr
Graceville FL 32440

John B Turner ☐ Change ☐ Addition
TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
125 Wentworth Dr
Dothan AL 36302

☐ Change ☐ Addition
TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

2-6-04

850-263-3267