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Feb 13 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 # **N10117** (2)

1. Corporation Name

KIWANIS CLUB OF IONA-MCGREGOR, INC.

Principal Place of Business

**5076 NORTHAMPTON DR
FT MYERS FL 33919
US**

Mailing Address

**9131 COLLEGE PKWY
STE 13-B BOX 227
FT. MYERS FL 33919
US**

3. Date Incorporated or Qualified

07/09/1985

4. FEI Number

59-2062761

Applied For
Not Applicable

5. Certificate of Status Desired

☐ \$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐ \$5.00 May Be
Added to Fees

7. Is this nonprofit corporation a homeowners association?

☐ Yes ☒ No

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30.

☐ Yes ☒ No

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip Country

24 25

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip Country

29 30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**FLETCHER, NEWMAN M.
5076 NORTHAMPTON DR
FT MYERS FL 33919**

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 type for printed name of registered agent and title if applicable)

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE	D	☒ DELETE
NAME	FLETCHER, NEWMAN M.	
STREET ADDRESS	5076 NORTHAMPTON DR	
CITY - ST - ZIP	FORT MYERS FL	
TITLE	SD	☒ DELETE
NAME	EVANS, RACHEL	
STREET ADDRESS	4747 HARBORTOWN LANE	
CITY - ST - ZIP	FORT MYERS FL	
TITLE	T	☒ DELETE
NAME	LUNDMAN, CAROL	
STREET ADDRESS	4749-7 ORANGE GROVE BLVD	
CITY - ST - ZIP	NORTH FORT MYERS FL	
TITLE	D	☒ DELETE
NAME	KOPF, RICHARD	
STREET ADDRESS	4100 STEAMBOARD BEND, #403	
CITY - ST - ZIP	FORT MYERS FL 33919	
TITLE	P	☒ DELETE
NAME	GAPP, ANTON	
STREET ADDRESS	11220 LONGWATER CHASE CT	
CITY - ST - ZIP	FT MYERS FL	
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY - ST - ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	PRES - DIR	☐ Change ☒ Addition
1.2 NAME	FRANK BIRELEY	
1.3 STREET ADDRESS	5018 HARBORTOWN LANE	
1.4 CITY - ST - ZIP	FT MYERS FL 33919	
2.1 TITLE	SECT - DIR	☒ Change ☒ Addition
2.2 NAME	ADA TRAPANESE	
2.3 STREET ADDRESS	1088 BREVITY LANE	
2.4 CITY - ST - ZIP	FT MYERS FL 33919	
3.1 TITLE	TREAS - DIR	☒ Change ☐ Addition
3.2 NAME	ANTON GAPP	
3.3 STREET ADDRESS	11220 LONGWATER CHASE	
3.4 CITY - ST - ZIP	FT MYERS FL 33908	
4.1 TITLE	V.P. - DIR	☒ Change ☒ Addition
4.2 NAME	TOM MULLAN	
4.3 STREET ADDRESS	707 SW 33RD TRAIL	
4.4 CITY - ST - ZIP	CAPE CORAL FL 33914	
5.1 TITLE	DIR	☒ Change ☒ Addition
5.2 NAME	JON HAYES	
5.3 STREET ADDRESS	4689 MAIKAI LANE	
5.4 CITY - ST - ZIP	BONITA SPRINGS FL 33434	
6.1 TITLE		☐ Change ☐ Addition
6.2 NAME		
6.3 STREET ADDRESS		
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:

Anton Gapp

ANTON GAPP

2/10/98 941-433-1784

CR2E037 (10/97)