

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998.
 AMOUNT DUE ON OR BEFORE 09/30/98: \$61.25 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$236.25).

FILED

Jul 15 1998 8:00am
 Secretary of State

0013192

NONPROFIT CORPORATION ANNUAL REPORT 1998



FLORIDA DEPARTMENT OF STATE
 Sandra B. Mortham
 Secretary of State
 DIVISION OF CORPORATIONS

DOCUMENT # N10258 (4)
 1. Corporation Name
 KIWANIS CLUB OF THE PLAYGROUND AREA, INC.



Principal Place of Business Mailing Address

ATTN: RICH GASPARIAN
 621 HOLLWOOD BLVD NE
 FT WALTON BEACH FL 32548
 US

KIWANIS CLUB OF PLAYGROUND AREA
 P.O. BOX 4652
 FORT WALTON BEACH FL 32549
 US

3. Date Incorporated or Qualified
 07/16/1985

4. FEI Number
 59-6569622

Applied For
 Not Applicable

2. Principal Place of Business 2a. Mailing Address

21 315 Hollywood Blvd, Suite 4
 22 Suite, Apt. #, etc. Suite 4
 23 City & State MARY ESTHER FL
 24 Zip 32569 25 Country USA
 26 ~~315 Hollywood Blvd~~
 27 ~~Suite~~ No change
 28 ~~MARY ESTHER FL~~
 29 ~~315~~ 30 ~~FL~~

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

9. Name and Address of Current Registered Agent

BAILEY, MICHAEL
 998 VITA LN
 FT WALTON BCH FL 32547

10. Name and Address of New Registered Agent

81 Name Joe Young
 82 Street Address (P.O. Box Number is Not Acceptable) 315 Hollywood Blvd, Suite 4
 83
 84 City MARY ESTHER FL 85 Zip Code 32569

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 Joe Young JOE YOUNG 7-07-98
 Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS

TITLE		<input checked="" type="checkbox"/> DELETE
NAME	GASPARIAN, RICH	
STREET ADDRESS	621 B 9TH ST	
CITY-ST-ZIP	SHALIMAR FL	
TITLE		<input type="checkbox"/> DELETE
NAME	KROLL, ROBERT	
STREET ADDRESS	784 NAVY ST	
CITY-ST-ZIP	FORT WALTON BEACH FL	
TITLE		<input checked="" type="checkbox"/> DELETE
NAME	BATE, ELIZABETH	
STREET ADDRESS	6247 RIVER RUN RD	
CITY-ST-ZIP	NAVARO FL	
TITLE		<input type="checkbox"/> DELETE
NAME	ALLERHEILIGEN, JAMES	
STREET ADDRESS	384 ECHO CIRCLE	
CITY-ST-ZIP	FT WALTON BEACH FL	
TITLE		<input type="checkbox"/> DELETE
NAME	BURTON, ROBERT	
STREET ADDRESS	360 BRIAN CIRCLE	
CITY-ST-ZIP	MARY ESTHER FL	
TITLE		<input checked="" type="checkbox"/> DELETE
NAME	YOUNG, JOE	
STREET ADDRESS	315 HOLLWOOD BLVD	
CITY-ST-ZIP	MARY ESTHER FL	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	Director	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	Jim Parker	
1.3 STREET ADDRESS	64 Shalimar Drive	
1.4 CITY-ST-ZIP	Shalimar, FL 32579	
2.1 TITLE	Director	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME		
2.3 STREET ADDRESS		
2.4 CITY-ST-ZIP		
3.1 TITLE	Treasurer	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	chuck Roland	
3.3 STREET ADDRESS	314 Green Acres Road	
3.4 CITY-ST-ZIP	Fort Walton Beach, FL 32548	
4.1 TITLE	President	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY-ST-ZIP		
5.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		
6.1 TITLE	Vice President	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	Shirley Young	
6.3 STREET ADDRESS	315 Hollywood Blvd, Suite 4	
6.4 CITY-ST-ZIP	MARY ESTHER, FL 32569	

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: Joe Young Secretary 7-07-98 850-244-3306
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E037 (5/98)