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FILED

May 15 1997 8:00am
Secretary of StateNONPROFIT
CORPORATION
ANNUAL REPORT
1997FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N19600 (8)

1. Corporation Name

KIWANIS CLUB OF GOLDEN GATE, NAPLES, FLORIDA, IN
C.

Principal Place of Business

Mailing Address

% CHARLES H. CASE
2172 41ST TERRACE SOUTH WEST
NAPLES FL 33999% CHARLES H. CASE
2172 41ST TERRACE SOUTH WEST
NAPLES FL 34116-6516

3. Date Incorporated or Qualified

03/09/1987

3a. Date of Last Report

05/01/1996

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

CASE, CHARLES H.
2172 41ST TERRACE SOUTH WEST
NAPLES FL 33999

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 | DELETE |
|-------|------------------------|----------------------------|-------------|-------------------------------------|
| D | LISTENBERGER, DONNA | 2260 KEARNY | NAPLES FL | <input checked="" type="checkbox"/> |
| S | BRINKMEYER, RICHARD C. | 1833 COURTYARD WAY NO. 208 | NAPLES FL | <input checked="" type="checkbox"/> |
| D | HAVRAN, PETER | 4110 11AVE SW | NAPLES FL | <input checked="" type="checkbox"/> |
| P | LEO GATES | 1766 50TH TERR SW | NAPLES FL | <input type="checkbox"/> |
| D | CASE, CHARLES | 2172 41ST TERRACE S.W. | NAPLES FL | <input type="checkbox"/> |
| TD | WILLIAM SOLOMON SALMON | 4285 29TH PLACE S.W. | NAPLES FL | <input type="checkbox"/> |

| 1.1 TITLE | 1.2 NAME | 1.3 STREET ADDRESS | 1.4 CITY-ST-ZIP | Change | Addition |
|-----------|-----------------|----------------------------------|-----------------|-------------------------------------|--------------------------|
| DD | T111 Geneva | 2164 42 St. S.W. P.O. Box#990116 | Naples FL 34116 | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| W | Welborn Sam | 815 Nursery Lane | Naples FL 34116 | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| D | Goforth Richard | 161 Napt Sand Dr | Naples FL 34104 | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| | | | | <input type="checkbox"/> | <input type="checkbox"/> |
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| | | | | <input type="checkbox"/> | <input type="checkbox"/> |

14. I do 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:

Charles H. Case

4/20/97

455-1163

CR2E037 (9/96)