

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 05, 2004 8:00 am
Secretary of State

02-05-2004 90012 012 ****61.25

DOCUMENT # N31398 1. Entity Name FLAGLER, PALM COAST, KIWANIS FOUNDATION, INC.																	
Principal Place of Business 100 KIWANIS WAY PALM COAST, FL 32137 US			Mailing Address P.O. BOX 350423 PALM COAST, FL 32135-0423 US														
2. Principal Place of Business Suite, Apt. #, etc.		3. Mailing Address Suite, Apt. #, etc.		44007281 													
City & State		City & State		01292004 Chg-NP CR2E037 (10/03)													
Zip		Country		4. FEI Number 59-2941424													
City & State		City & State		Applied For ☐ Not Applicable													
Zip		Country		5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required													
6. Name and Address of Current Registered Agent HALL, RICHARD S 7 BLACKTHORN COURT PALM COAST, FL 32137				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code													
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 _____ (NOTE: Registered Agent signature required when reinstating.) DATE _____																	
Filing 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																	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width: 50%; padding: 5px;"> P ROSEVEAR, JIM 15 BECKER LANE PALM COAST, FL 32137 </td> <td style="width: 50%; padding: 5px;"> ☒ Delete </td> </tr> <tr> <td style="padding: 5px;"> T CONKLING, RICHARD 5207 S JOHN ANDERSON FLAGLER BEACH, FL 32136 </td> <td style="padding: 5px;"> ☐ Delete </td> </tr> <tr> <td style="padding: 5px;"> D CALDERARO, MARILYN 24 BARBERA LANE PALM COAST, FL 32137 </td> <td style="padding: 5px;"> ☒ Delete </td> </tr> <tr> <td style="padding: 5px;"> D BURNET, BUD 116 FORSYTHE LANE PALM COAST, FL 32137 </td> <td style="padding: 5px;"> ☐ Delete </td> </tr> <tr> <td style="padding: 5px;"> D WRAY, BERNARD 35 BARRINGTON DRIVE PALM COAST, FL 32137 </td> <td style="padding: 5px;"> ☒ Delete </td> </tr> <tr> <td style="padding: 5px;"> D HALL, RICHARD 7 BLACK THORN COURT PALM COAST, FL 32137 </td> <td style="padding: 5px;"> ☐ Delete </td> </tr> </table>					P ROSEVEAR, JIM 15 BECKER LANE PALM COAST, FL 32137	☒ Delete	T CONKLING, RICHARD 5207 S JOHN ANDERSON FLAGLER BEACH, FL 32136	☐ Delete	D CALDERARO, MARILYN 24 BARBERA LANE PALM COAST, FL 32137	☒ Delete	D BURNET, BUD 116 FORSYTHE LANE PALM COAST, FL 32137	☐ Delete	D WRAY, BERNARD 35 BARRINGTON DRIVE PALM COAST, FL 32137	☒ Delete	D HALL, RICHARD 7 BLACK THORN COURT PALM COAST, FL 32137	☐ Delete
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11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10																	
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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: 1/29/04 586-439-3251 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #																	