

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 25, 2005 8:00 am
Secretary of State

04-25-2005 90309 044 ****61.25

DOCUMENT # N93000003318

1. Entity Name
THE HEART OF FLORIDA CIVITAN CLUB, INC.



Principal Place of Business
**1310 ALTALOMA AVE
ORLANDO, FL 32803 US**

Mailing Address
**PO BOX 149602
ORLANDO, FL 32814-9602 US**

50043807



2. Principal Place of Business

1701 LEE RD, #381-L

3. Mailing Address

SAME

Suite, Apt. #, etc.

Suite, Apt. #, etc.

WINTER PARK, FL

1701 LEE RD, #381-L

City & State

City & State

WINTER PARK, FL

Zip

Country

32789 USA

Zip

Country

32789 USA

01102005 Chg-NP

CR2E037 (10/03)

4. FEI Number
59-3237266

Applied For
Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**KURTZ, RUTHIE M
1310 ALTALOMA AVE.
ORLANDO, FL 32803**

7. Name and Address of New Registered Agent

Name

MARCIA FERRANT

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

1701 LEE RD, #381-L

City

WINTER PARK FL

Zip Code

32789

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

Marcia Ferrant

MARCIA FERRANT TREASURER

4/20/05

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

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$61.25
Due by May 1, 2005**

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 **D/P** ☐ Delete
NAME **KURTZ, RUTHE**
STREET ADDRESS **1310 ALTALOMA AVENUE**
CITY-ST-ZIP **ORLANDO, FL**

TITLE **D/S** ☐ Delete
NAME **TERBORG, MARILYN**
STREET ADDRESS **2717 BOWER RD**
CITY-ST-ZIP **WINTER PARK, FL 32792**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☐ Change ☒ Addition
NAME **MARCIA FERRANT**
STREET ADDRESS **1701 LEE RD, #381-L**
CITY-ST-ZIP **WINTER PARK, FL 32789**

TITLE **D/P** ☒ Change ☐ Addition
NAME **KURTZ, RUTH**
STREET ADDRESS **2515 LAURA PLACE**
CITY-ST-ZIP **ORLANDO, FL 32803-3626**

TITLE **D/S** ☒ Change ☐ Addition
NAME **TERBORG, MARILYN**
STREET ADDRESS **2717 BOWER RD**
CITY-ST-ZIP **WINTER PARK, FL 32792**

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

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

TITLE ☐ Change ☐ Addition
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:

Marcia Ferrant **MARCIA FERRANT**

4/20/05 4072924400

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

X220