FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N9400001707 (8)

KIWANIS CLUB OF GREATER BRANDON FOUNDATION, INC.

FILED Feb 27 1998 8:00am Secretary of State

Principal Place of Business		Mailing Address			T HOUSING OUR POLES OF IN COURT BUILT ERFAR OU	U(IFQII IBQII	OBINE HODE HODE	
2208 CHEROKEE TRAIL VALRICO FL 33599-5533 US		P. O. BOX 581 BRANDON FL 33509-0581 US		3. Date Incorporated or Qualified 04/04/1994 4. FEI Number 59-3374183		Applied For Not Applicable		
	Place of Business	2a. Mailing Address				Additional		
21		26		5. Certificate of Status Desired		Required		
Sulte, Apt. #, etc.		Suite, Apt. #, etc.		6. Election Campaign Financing		May Be		
22 City & Stat	6	City & State				Trust Fund Contribution Added to Fees		
23		28		7. Is this nonprofit corporation a homeowners association? Yes X No				
Zip	Country	Zip	· · · · · · · · · · · · · · · · · · ·			8. This corporation owes or has paid the current year Intangible		
24	25 29 30		30			Personal Property Tax due June 30. 🔲 Yes 💢 No		
	9. Name and Address of Curre	nt Registered Agent	81	Ne	ıme	10. Name and Address of New Registered A	gent	•
JOHN T. KINGSTON PA								
209 E. ROBERTSON ST.			62	2 Str	eet Addre	ess (P.O. Box Number is Not Acceptable)		
BRANDON FL 33511			83	3				
			B4	\$ Cit	·		65 Zip	Code
11			1	7	•	FL	1 1	
office or r agent. I a						oration submits this statement for the purpose of on's board of directors. I hereby accept the appe	intment a	s registered
				opistered Agent signature required		ad when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS AND	DIRECTO	DC IN 12
TITLE	D OFFICERS AIN	DELETE	1.1 TITLE			ADDITIONS/CHANGES TO OFFICERS AND	☐ Change	
NAME	MCKENNEY, WAYNE		1.2 NAME					
STREET ADDRESS	1013 WINCHESTER LANE		1.3 STREET	T ADDR	ESS			
CITY-ST-ZIP	VALRICO FL 33594		1.4 CITY-1	ST-ZIP				
TITLE	D	☐ DELETE	2.1 TITLE				Change	Addition
NAME	ANAL DENTALLE DE		2.2 NAME					
STREET ADDRESS	2715 BENT LEAF DR. VALRICO FL		2.3 STREE					
CITY-ST-ZIP TITLE	PD PD	☐ DELETE	2.4 CITY - 3.1 TITLE	-ST-ZIP	- 		Change	Addition
NAME	BARTLETT, ROBERT R		3.2 NAME				Unango	
STREET ADDRESS	4444 BE4618486B 1441E			3.3 STREET ADDRESS				
CITY-ST-ZIP	MAL DICO EL COCOA			3.4. CITY-ST-ZIP				
TITLE	TD	DELETE	4.1 TITLE				Change	Addition
NAME	STERTZER, CHARLOTTE		4. 2 NAME	Ē				
STREET ADDRESS	3416 BENT OAK ST.		4.3 STREET	T ADDR	ESS			
CITY-SY-ZIP	VALRICO FL 33594	Librita	4.4 CITY-5	ST-ZIP			<u> </u>	4.4491
TITLE	SD Antross, Richard	☐ DELETE	5.1 TITLE				Change	Addition
NAME Street address	2208 CHEROKEE TR		5.2 NAME					
CITY-ST-ZIP	VALRICO FL 33594		5.3 STREET 5.4 CITY-S		133			
TITLE	D	☐ DELETE	6.1 TITLE	31-ZH			Change	Addition
NAME	NORMAN, KEN		6.2 NAME					
STREET ADDRESS	2019 CRICKET LANE		6.3 STREET		ESS			
CITY-ST-ZIP	VALRICO FL		6.4 CITY - 5					
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.								