FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1998

Principal Place of Business

2. Principal Place of Business

Suite, Apt. #, etc.

1001 STARKEY RD

LARGO FL 33771

LOT 73



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 1. Corporation Name N94000003451 (1)

THE KIWANIS HORSES FOR HANDICAPPED FOUNDATION OF PINELLAS COUNTY, INC.

2a. Mailing Address

Suite, Apt. #, etc.

FILED Jan 22 1998 8:00am Secretary of State

Applied For

\$8.75 Additional

Fee Required

\$5.00 May Be

Not Applicable

Mailing Address	
1001 STARKEY RD LOT 73 LARGO FL 33771	3. Date Incorporated or Qualified 07/11/1994
HS	4. FEI Number Applied For

59-3259486

5. Certificate of Status Desired

6. Election Campaign Financing

22		27				Trust Fund Contribu	ution L	Added to	Fees		
City & Stat	е	City & State			7. Is this nonprofit cor			n?			
23	28					☐ Yes 🌠 No					
Zip	Country	Zip	Cou	untry		8. This corporation ow	es or has paid the cu	rrent year Int	angible [
24	25	29	30			Personal Property Tax due June 30. Yes No NH					
Name and Address of Current Registered Agent						10. Name and Addres	s of New Registered	Agent			
					ame _				ļ		
HARRI, PATRICIA				82 Street Address (P.O. Box Number is Not Acceptable)							
1001 STARKEY RD. LOT 73				1001 Starkey Rd., Lot 73							
LARGO FL 33771				83 TOOL Starkey Ru., Lot 75							
				84 Ci	h, T			85 Zip (^ode		
				[0,	у La:	rgo	FL		3771		
11. Pursuant	to the provisions of Sections 617,0502	and 617.1508, Florida Sta	tutes, the a	bove-na	med corpo	ration submits this staten	nent for the purpose of	of changing it	s registered		
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.											
Dotmining I II											
SIGNATURE Talketus A. Transcolut Patricia I. Harris Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstailing) DATE 1/8/98											
12.	OFFICERS AND I		13.			ADDITIONS/CHANG	ES TO OFFICERS AN	DIRECTOR	S IN 12		
TITLE	PD	☐ DELETE	1.1 Ti	ITLE				☐ Change	Addition		
NAME	HARRIS, D E		1.2 N	AME							
STREET ADDRESS	1001 STARKEY RD., LOT 73		1.3 S	TREET ADDE	RESS						
CITY-ST-ZIP	LARGO FL		1.4 C	ITY-ST-ZIP	.		r ^a				
TITLE	VD DELETE		2.1 Ti	TLE		<u> </u>		Change	Addition		
NAME	RAYMOND, WAYNE		2.2 N	AME			ı r				
STREET ADDRESS	9827 ASHLEY DRIVE		2.3 \$	TREET ADOF	RESS						
CITY-ST-ZIP	SEMINOLE FL		2.40	CITY-ST-ZIF	,						
TITLE	D DELETE		3.1 TI	TLE				☐ Change	Addition		
NAME	BERNSTEIN, HARVEY	A-21	3.2 N	AME					1		
STREET ADDRESS	7300 SUN ISLAND DRIVE STE.	1803	3.3 ST	TREET ADDR	ESS						
CITY-ST-ZIP	ST. PETERSBURG FL 33707		3.4. C	ITY-ST-ZIF	,						
TITLE	TD	☐ DELETE	4.1 71					☐ Change	Addition		
NAME	BERNSTEIN, HARVEY		4.2 N	IAME							
STREET ADDRESS	7300 SUN ISLAND DRIVE #180	3	4,3 S	TREET ADDR	ESS						
CITY-ST-ZIP	ST PETERSBURG FL	-		ITY-ST-ZIP							
TITLE	D	DELETE	5.1 TI					☐ Change	Addition		
NAME	FRYE, GEORGE		5.2 N	AME							
STREET ADDRESS	1001 STARKEY RD., LOT 257		5,3 SI	TREET ADDR	ESS						
CITY-ST-ZIP	LARGO FL			rty-st-zip							
TITLE	SD	DELETE	6.1 TJ					Change	Addition		
NAME	HARRIS, PATRICIA L.	_	6,2 N					_			
STREET ADDRESS	1001 STARKEY RD. LOT 73		- 1	TREET ADDR	ESS						
CITY-ST-ZIP	LARGO FL			ITY-ST-ZIP							
	certify that the information supplied with	this filing does not qualify			stated in S	ection 119.07(3)(i), Florid	la Statutes. I further c	ertify that the	information		

Inereby certify that the information supplied with this falling does not quality for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the informatio indicated on this annual report or suppliemental 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.

D. E. Harris, President

GNATURE:

ONLY 18/98

ONLY 19/98

ONLY 19/98

ONLY 19/98

SIGNATURE:

(813) 539-0455