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FILED  
Apr 15 1997 8:00am  
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT <b>1997</b>	 FLORIDA DEPARTMENT OF STATE <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **N96000005257 (8)**

1. Corporation Name

**KIWANIS CLUB OF WESTSIDE, WEST PALM BEACH SCHOLARSHIP FUND, INC.**

Principal Place of Business

Mailing Address

**1860 FOREST HILL BLVD.  
SUITE 206  
WEST PALM BEACH FL 33406**

**1860 FOREST HILL BLVD.  
SUITE 206  
WEST PALM BEACH FL 33406-6092**



2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

23 City & State

27 City & State

24 Zip Country

29 Zip Country

3. Date Incorporated or Qualified  
**10/14/1996**

3a. Date of Last Report

4. FEI Number

☒ Applied For  
☐ Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution ☐

**\$5.00** May Be  
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,  
Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**KRUTZ, RAYMOND  
1860 FOREST HILL BLVD.  
SUITE 206  
WEST PALM BEACH FL 33406**

81 Name **McEldowney, Debbie**  
82 Street Address (P.O. Box Number is Not Acceptable)  
**1750 N. Florida Mango Rd.**  
83  
84 City **West Palm Beach** FL 85 Zip Code **33409**

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 *Debbie McEldowney*

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 **D** ☒ DELETE  
NAME **KRUTZ, RAYMOND**  
STREET ADDRESS **1860 FOREST HILL BLVD., SUITE 206**  
CITY-ST-ZIP **WEST PALM BEACH FL 33406**

1.1 TITLE ☐ Change ☐ Addition  
1.2 NAME  
1.3 STREET ADDRESS  
1.4 CITY-ST-ZIP

TITLE **D** ☐ DELETE  
NAME **HAUSMAN, LORI**  
STREET ADDRESS **931 VILLAGE BLVD., SUITE 905**  
CITY-ST-ZIP **WEST PALM BEACH FL 33409**

2.1 TITLE ☐ Change ☐ Addition  
2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY-ST-ZIP

TITLE **D** ☐ DELETE  
NAME **BRANDENBURG, CLEMENT JR**  
STREET ADDRESS **2000 PALM BEACH LAKES BLVD., #800**  
CITY-ST-ZIP **WEST PALM BEACH FL 33409**

3.1 TITLE ☐ Change ☐ Addition  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP

TITLE **SD** ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

4.1 TITLE ☐ Change ☒ Addition  
4.2 NAME **McEldowney, Debbie**  
4.3 STREET ADDRESS **1750 N. Florida Mango Rd.**  
4.4 CITY-ST-ZIP **West Palm Beach, FL 33409**

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP

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: *Debbie McEldowney*

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CR2E037 (9/96)