2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 705391

FILED Apr 25, 2005 Secretary of State

Entity Name: ROTARY CLUB OF PLANT CITY, FLORIDA, INC.

Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
P.O. BOX 1 PLANT CIT	1404 'Y, FL 33566	US			
Current Mailing Address:			New Mailing Addres	New Mailing Address:	
P.O. BOX 1 PLANT CIT	1404 'Y, FL 33566	US			
FEI Number:	59-2346796	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and	Address of Cu	ırrent Registered Agent:	Name and Address	of New Registered Agent:	
	HARLES S. ERS STREET 'Y, FL 33566	US			
	named entity su of Florida.	ubmits this statement for the pu	urpose of changing its register	ed office or registered agent, or both,	
SIGNATUR	RE:				
	Electronic	c Signature of Registered Ager	nt	Date	
OFFICERS AND DIRECTORS:			ADDITIONS/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	PD ()[SOLOMON, STE P O BOX 1030 PLANT CITY, FL		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	TD () I WETHERINGTOR 703 S HITCHCOO PLANT CITY, FL	CK STREET	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	VD () [BROWNLEE, DE 13832 HWY 92 E DOVER, FL 335	≣	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	PUKAS, TOD	Delete REDMAN PARKWAY 33566	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D () I COOK, BEN 5171 EAGLES N LAKELAND, FL		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D () I PAROLINI, BILL 1005 N TEAKWO PLANT CITY, FL		Title: Name: Address: City-St-Zip:	() Change () Addition	

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: STEVE SOLOMON PRES 04/25/2005