

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 26, 2004 8:00 am
Secretary of State

02-26-2004 90022 019 ****61.25

DOCUMENT # 719554

1. Entity Name
ROTARY CLUB OF BROOKSVILLE, INC.



Principal Place of Business
**POST OFFICE BOX 701
BROOKSVILLE, FL 34601 US**

Mailing Address
**POST OFFICE BOX 701
BROOKSVILLE, FL 34601 US**

94020383



02202004 Chg-NP CR2E037 (10/03)

4. FEI Number
59-6209583

Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

**NICOLAI, KAREN
4287 BELLAIRE DR
SPRINGHILL, FL 34607**

7. Name and Address of New Registered Agent

Name
Street Address (P.O. Box Number is Not Acceptable)
City **FL** Zip Code

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

Signature of officer or director of corporation or other person authorized to execute this statement

NOTE: Registered Agent signature required when constituting

DATE

**Filing Fee is \$61.25
Due by May 1, 2004**

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	S	☐ Delete
NAME	TRUMP, RICHARD	
STREET ADDRESS	26262 LAKE LINDSEY RD	
CITY ST ZIP	BROOKSVILLE, FL	
TITLE	D	☐ Delete
NAME	BLAIR, GWYNN	
STREET ADDRESS	715 FERNWOOD DR	
CITY ST ZIP	BROOKSVILLE, FL 34601	
TITLE	D	☐ Delete
NAME	HOBIN, EDWARD	
STREET ADDRESS	10425 HOTTINGHAM FOREST DR	
CITY ST ZIP	BROOKSVILLE, FL 34601	
TITLE	T	☐ Delete
NAME	NICOLAI, KAREN	
STREET ADDRESS	4287 BELLAIRE DRIVE	
CITY ST ZIP	HERNANDO BEACH, FL	
TITLE	P	☒ Delete
NAME	PHILLIPS, KAREN	
STREET ADDRESS	1420 IVYDALE RD	
CITY ST ZIP	SPRING HILL, FL 34608	
TITLE	D	☐ Delete
NAME	PAUL, LIZA	
STREET ADDRESS	11447 ROYAL DR	
CITY ST ZIP	BROOKSVILLE, FL 34601	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

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	
TITLE	☐ Change ☒ Addition
NAME	McKenna, Fred
STREET ADDRESS	13210 Jessica Dr.
CITY ST ZIP	Spring Hill, FL 34609
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 this 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Karen Nicolai

Treasurer 2/20/04 352-7544206