

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 737054

FILED
Feb 18, 2004
Secretary of State**Entity Name:** ROTARY CLUB OF INVERNESS, INCORPORATED**Current Principal Place of Business:**439 S. HWY 41
INVERNESS, FL 34450**New Principal Place of Business:**727 SOUTH US HWY 41
INVERNESS, FL 34450**Current Mailing Address:**P.O. BOX 1317
INVERNESS, FL 34451**New Mailing Address:****FEI Number:** 59-2068516 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired (X)****Name and Address of Current Registered Agent:**SLAYMAKER, THOMAS
2218 W HWY 44
INVERNESS, FL 34450 US**Name and Address of New Registered Agent:**

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.

SIGNATURE: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:**Title:** P () Delete
Name: DAVIES, CRAIG
Address: 325 S. BLACK MOUNTAIN DRIVE
City-St-Zip: INVERNESS, FL 34450**Title:** T () Delete
Name: HENSLEY, ROCKY
Address: 7620 E. APPLEWOOD DR
City-St-Zip: INVERNESS, FL 34450**Title:** T () Delete
Name: MARTIN, REBECCA
Address: 6710 S. BEAGLE DRIVE
City-St-Zip: HOMOSASSA, FL 344484961**Title:** T () Delete
Name: HUNT, DORA
Address: 9730 E. REGENCY ROAD WEST
City-St-Zip: INVERNESS, FL 34450**Title:** () Delete
Name:
Address:
City-St-Zip:**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:****Title:** P (X) Change () Addition
Name: HARRIS, PAUL
Address: 3613 E HAVEN STREET
City-St-Zip: INVERNESS, FL 34453**Title:** PP (X) Change () Addition
Name: DAVIES, CRAIG
Address: 3250 S BLACKMOUNTAIN DR
City-St-Zip: INVERNESS, FL 34450**Title:** S (X) Change () Addition
Name: MARTIN, REBECCA
Address: 6710 S. BEAGLE DRIVE
City-St-Zip: HOMOSASSA, FL 344484961**Title:** T (X) Change () Addition
Name: HUNT, DORA
Address: 9730 E. REGENCY ROW
City-St-Zip: INVERNESS, FL 34450**Title:** PE () Change (X) Addition
Name: LOBEL, DOUG
Address: 6090 E DALY LANE
City-St-Zip: INVERNESS, FL 34452

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: DORA HUNT

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02/18/2004

Electronic Signature of Signing Officer or Director

Date