2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 17, 2004
Secretary of State

DOCUMENT# 756311

Entity Name: ROTARY CLUB OF ST. CLOUD, INC.

Current Principal Place of Business:

1035 NEW YORK AVENUE
ST CLOUD, FL 34769 US

New Principal Place of Business:

Current Mailing Address:

1035 NEW YORK AVENUE
ST CLOUD, FL 34769 US

New Mailing Address:

FEI Number: 59-2348477 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

HAGUE, MICHAEL
4186 BOB WHITE TRAIL
SAINT CLOUD, FL 34772 US

Name and Address of New Registered Agent:

HOWES, STEVE
1725 JAN LAN BLVD
SAINT CLOUD, FL 34772 US

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: STEVE HOWES 03/17/2004
Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title: PD ( ) Delete
Name: HAGUE, MICHAEL
Address: 4186 BOB WHITE TRAIL
City-St-Zip: ST CLOUD, FL 34772

Title: PD ( ) Delete
Name: HOWES, STEVE
Address: 1725 JAN LAN BLVD
City-St-Zip: ST CLOUD, FL 34772

Title: SD ( ) Delete
Name: GRISSOM, CLEVE
Address: 325 MARYLAND AVENUE
City-St-Zip: SAINT CLOUD, FL 34769

Title: D ( ) Delete
Name: DORSEY, C. THOMAS
Address: 3948 CANOE CREEK ROAD
City-St-Zip: SAINT CLOUD, FL 34769

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition
Name: HOWES, STEVE
Address: 1725 JAN LAN BLVD.
City-St-Zip: ST CLOUD, FL 34772

Title: SD (X) Change ( ) Addition
Name: FARROW, MARK
Address: 3958 CORETTA COURT
City-St-Zip: ST CLOUD, FL 34772

Title: TD (X) Change ( ) Addition
Name: DORSEY, KIMBERLY
Address: 3948 CANOE CREEK ROAD
City-St-Zip: SAINT CLOUD, FL 34772

Title: D (X) Change ( ) Addition
Name: DORSEY, C. THOMPSON
Address: 3948 CANOE CREEK ROAD
City-St-Zip: SAINT CLOUD, FL 34769

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: C. THOMPSON DORSEY D 03/17/2004
Electronic Signature of Signing Officer or Director — Date