2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 16, 2003 8:00 am
Secretary of State
01-16-2003 90152 012 ****70.00

DOCUMENT # 756311

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

Principal Place of Business	Mailing Address
1035 NEW YORK AVENUE ST CLOUD FL 34769 US	1035 NEW YORK AVENUE ST CLOUD FL 34769 US

☐ CHECK HERE IF MAKING CHANGES

2. Principal Place of Business	3. Mailing Address
1035 New York Avenue	1035 New York Avenue
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: St. Cloud, Fla.	City & State: St. Cloud, Florida
Zip: 34769 Country: Osceola	Zip: 34769 Country: Osceola

4. FEI Number 59-2348477 ☐ Applied For ☒ Not Applicable

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

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
DORSEY, C T 3948 CANOE CREEK RD ST CLOUD FL 34769	Name: Michael Hague Street Address (P.O. Box Number is Not Acceptable): 4186 Bob White Trail City: St. Cloud **FL** Zip Code: 34772

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: C T Dorsey — 1/10/03
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW: FEE IS $61.25

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			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD DORSEY, C T 3948 CANOE CREEK RD ST CLOUD FL 34772	☒ Delete	PD Michael Hague 4186 Bob White Trail St. Cloud, Florida 34772	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD HAGUE, MIKE 4186 BOB WHITE TRAIL ST CLOUD FL 34772	☒ Delete	PD Steve Howes 1725 Jan Lan Blvd St. Cloud, Fl. 34772	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD LANE, BILL 4555 STORY RD ST CLOUD FL 34772	☐ Delete	SD. Cleve-Grissom 325 Maryland Avenue St. Cloud, Florida 34769	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D THOMASON, KELLY 2315 ELDORADO CT ST. CLOUD FL 34771	☐ Delete	D C. Thompson Dorsey 3948 Canoe Creek Road St. Cloud, Florida 34769	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete		☐ Change ☐ Addition

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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: SIGNATURE REQUIRED — 1/6/03 (407)891-3100
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E037 (10/02)