2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED Jul 13, 2007 8:00 am Secretary of State

DOCUMENT # F9600005343 1. Entity Name THE ROTARY FOUNDATION OF ROTARY INTERNATIONAL, INC.					07-13-2007	90087 008 ****61	1.25
1560 SHERMAN AVENUE 15 ONE ROTARY CENTER 0		Mailing Address 1560 SHERMAN AVENUE ONE ROTARY CENTER EVANSTON, IL 60201					[1]] 5] 5] 10 3]
Principal Place of Business - No P.O. Box # 3.		3. Mailing Address					
Suite, Apt. #, etc.		Suite, Apt. #, etc.		07052007	Chg-NP	CR2E037 (12/06)	
City & State		City & State		4. FEI Number 36-3245		 	oplied For ot Applicable
Zip	Country	Zip	Country	5. Certificate o	f Status Desired	\$8.75 Add Fee Require	
	6. Name and Address of Current Reg	istered Agent		7. Name and A	ddress of New R	Registered Agent	
CORPORA	ATION SERVICE COMPANY		Name				
CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 32301-2525			Street	Street Address (P.O. Box Number is Not Acceptable)			
İ			City			FL Zip Cod	le
the obligat	lons of registered agent.						
	Signature, typed or printed name of registered agent and til	tle if applicable. (NOTE	. Registered Agent signa	ture required when reinstating)		DATE	
		·· ·	npaign Financing	\$5.00 May Be Added to Fees		DATE lake check payable t rida Department of S	
	Signature, typed or printed name of registered agent and the Filling Fee is \$61.25 ue by September 14, 2007 OFFICERS AND DIRECT	9. Election Carr Trust Fund C	npaign Financing	\$5.00 May Be Added to Fees ADDITIONS/CHA	Flor	lake check payable t	tate
D	Signature, typed or printed name of registered agent and the Filling Fee is \$61.25 ue by September 14, 2007	9. Election Carr Trust Fund C	npaign Financing contribution.	\$5.00 May Be Added to Fees ADDITIONS/CHAI C Rattakul, Bhichai 231 Moo Ban Pan	Flor	lake check payable trida Department of S RS AND DIRECTORS IN	tate
10. TITLE NAME STREET ADDRESS	Filing Fee is \$61.25 ue by September 14, 2007 OFFICERS AND DIRECT T ABDALLA, MICHAEL W 4022 ROLLING GREEN LANE	9. Election Carr Trust Fund C TORS Delete	npaign Financing contribution. 11. TITLE NAME STREET ADDRESS	\$5.00 May Be Added to Fees ADDITIONS/CHAI C Rattakul, Bhichai 231 Moo Ban Pan Suan Luang, Band CV Scott, Robert S. 239 Queen Street	Floo NGES TO OFFICE ya, Patanaka Jkok 10250	lake check payable trida Department of S RS AND DIRECTORS IN	tate
10. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	Signature, typed or printed name of registered agent and the Filling Fee is \$61.25 ue by September 14, 2007 OFFICERS AND DIRECT T ABDALLA, MICHAEL W 4022 ROLLING GREEN LANE ORANGE, CA 928697 C GIAY, LUIS V DORREGO 200 B 2740APD	9. Election Carr Trust Fund C TORS Delete	npaign Financing contribution. 11. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	\$5.00 May Be Added to Fees ADDITIONS/CHAI C Rattakul, Bhichai 231 Moo Ban Pan Suan Luang, Band CV Scott, Robert S.	Floo NGES TO OFFICE ya, Patanaka Jkok 10250	lake check payable to rida Department of SERS AND DIRECTORS IN Change	tate V 10 ✓ Addition
10. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-SI-ZIP TITLE NAME STREET ADDRESS	Filing Fee is \$61.25 ue by September 14, 2007 OFFICERS AND DIRECT T ABDALLA, MICHAEL W 4022 ROLLING GREEN LANE ORANGE, CA 928697 C GIAY, LUIS V DORREGO 200 B 2740APD ARRECIFESM BD, AS,ARGENTINE T ESTESS, GLENN SR 3844 NORTH WOODRIDGE RD	9. Election Carr Trust Fund C TORS Delete	npaign Financing contribution. 11. III.E NAME STREET ADDRESS CITY-SI-ZIP TITLE NAME STREET ADDRESS CITY-SI-ZIP TITLE NAME STREET ADDRESS CITY-SI-ZIP TITLE NAME STREET ADDRESS	\$5.00 May Be Added to Fees ADDITIONS/CHAI C Rattakul, Bhichai 231 Moo Ban Pan Suan Luang, Band CV Scott, Robert S. 239 Queen Street	Floo NGES TO OFFICE ya, Patanaka Jkok 10250	Alake check payable to rida Department of Standard Change arn 30 Rd	tate √ 10 ✓ Addition ✓ Addition
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12. I hereby certify that the information supplied with this filling does not quality for the exemptions contained in Chapter 119, 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 literampowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

9 hel 07 847/866

Daytime Prone # 2006

Edwin Futa