

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000006438

FILED
Apr 28, 2005
Secretary of State

Entity Name: FOUR TOWNES ROTARY CLUB, INC.

Current Principal Place of Business:

1750 SOUTH VOLUSIA AVENUE
ORANGE CITY, FL 32763

New Principal Place of Business:

1750 SOUTH VOLUSIA AVENUE
SUITE 7
ORANGE CITY, FL 32763

Current Mailing Address:

1750 SOUTH VOLUSIA AVENUE
ORANGE CITY, FL 32763

New Mailing Address:

1750 SOUTH VOLUSIA AVENUE
SUITE 7
ORANGE CITY, FL 32763

FEI Number: 41-2059081

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HARDESTY, ALONZO H III
1750 SOUTH VOLUSIA AVENUE
ORANGE CITY, FL 32724 US

Name and Address of New Registered Agent:

HARDESTY, ALONZO H III
1750 SOUTH VOLUSIA AVENUE
SUITE 7
ORANGE CITY, FL 32724 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: ALONZO H HARDESTY, III

04/28/2005

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: NORTHEY, PAT
Address: 2310 CARSON LANE
City-St-Zip: DELTONA, FL 32725

Title: D () Delete
Name: FULTON, PATRICK
Address: 145 SOUTH HWY 17-92
City-St-Zip: DEBARY, FL 32713

Title: TD () Delete
Name: HARDESTY, ALONZO H III
Address: 1750 SOUTH VOLUSIA AVE., STE. 7
City-St-Zip: ORANGE CITY, FL 32763

Title: PD () Delete
Name: PEARCE, LESLIE
Address: 2015 NORTH NEMO DRIVE
City-St-Zip: DELTONA, FL 32725

Title: SD () Delete
Name: SUTO, DEBRA
Address: 51 MAIN STREET
City-St-Zip: ENTERPRISE, FL 32725

Title: D () Delete
Name: DOLAN, TIM
Address: 1083 CROSS CUT WAY
City-St-Zip: LONGWOOD, FL 32750

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change () Addition
Name: NEESE, MIKE
Address: 1615 DUNLAP DRIVE
City-St-Zip: DELTONA, FL 32725

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change () Addition
Name: PEARCE, LESLIE
Address: 2015 NORTH NEMO DRIVE
City-St-Zip: DELTONA, FL 32725

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: DP (X) Change () Addition
Name: DOLAN, TIM
Address: 1083 CROSS CUT WAY
City-St-Zip: LONGWOOD, FL 32750

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: ALONZO H HARDESTY, III

TD

04/28/2005

Electronic Signature of Signing Officer or Director

Date