2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 16, 2006
Secretary of State

DOCUMENT# N02000006438

Entity Name: FOUR TOWNES ROTARY CLUB, INC.

Current Principal Place of Business:

1750 SOUTH VOLUSIA AVENUE
SUITE 7
ORANGE CITY, FL 32763

New Principal Place of Business:

Current Mailing Address:

1750 SOUTH VOLUSIA AVENUE
SUITE 7
ORANGE CITY, FL 32763

New Mailing Address:

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
SUITE 7
ORANGE CITY, FL 32724 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:	D	( ) Delete
Name:	NORTHEY, PAT	
Address:	2310 CARSON LANE	
City-St-Zip:	DELTONA, FL 32725	
Title:	D	( ) Delete
Name:	NEESE, MIKE	
Address:	1615 DUNLAP DRIVE	
City-St-Zip:	DELTONA, FL 32725	
Title:	TD	( ) Delete
Name:	HARDESTY, ALONZO H III	
Address:	1750 SOUTH VOLUSIA AVE., STE. 7	
City-St-Zip:	ORANGE CITY, FL 32763	
Title:	D	( ) 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:	DP	( ) 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:	P/D	(X) Change ( ) Addition
Name:	NEESE, MIKE	
Address:	1615 DUNLAP DRIVE	
City-St-Zip:	DELTONA, FL 32725	
Title:	T/D	(X) Change ( ) Addition
Name:	HARDESTY, ALONZO H III	
Address:	1750 SOUTH VOLUSIA AVE., STE. 7	
City-St-Zip:	ORANGE CITY, FL 32763	
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:	S/D	(X) Change ( ) Addition
Name:	SUTO, DEBRA	
Address:	51 MAIN STREET	
City-St-Zip:	ENTERPRISE, FL 32725	
Title:	D	(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 Chapter 119, 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 T/D 02/16/2006

Electronic Signature of Signing Officer or Director — Date