

**2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED  
Apr 22, 2004  
Secretary of State**

DOCUMENT# N02000008648

Entity Name: ROTARY CLUB OF COCONUT GROVE, FLORIDA, INC.

**Current Principal Place of Business:**

6106 BLUE LAGOON DR  
SUITE 420  
MIAMI, FL 33126

**New Principal Place of Business:**

**Current Mailing Address:**

6106 BLUE LAGOON DR  
SUITE 420  
MIAMI, FL 33126

**New Mailing Address:**

FEI Number: 04-3722999      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

TRESCOTT, ROBERT L  
2121 PONCE DE LEON BLVD  
SUITE 900  
CORAL GABLES, FL 33134 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: PD ( ) Delete  
Name: BUTLER, RICHARD H  
Address: 6106 BLUE LAGOON DR #420  
City-St-Zip: MIAMI, FL 33126

Title: VD ( ) Delete  
Name: LONES, CHRIS  
Address: 1550 MADRUGA AVE #326  
City-St-Zip: CORAL GABLES, FL 33146

Title: SD ( ) Delete  
Name: YOURIST, JAY ELDON  
Address: 10650 SW 137 STREET  
City-St-Zip: MIAMI, FL 33176

Title: TD ( ) Delete  
Name: ROSS, DONALD  
Address: 8630 SW 118 STREET  
City-St-Zip: MIAMI, FL 33156

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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

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

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

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: RICHARD BUTLER

PRES

04/22/2004

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date