

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED

Mar 14, 2007 08:00 AM
Secretary of State

DOCUMENT # N02000008850

1. Entity Name



THE ROTARY CLUB OF FORT LAUDERDALE/CYPRESS CREEK, INC.

Principal Place of Business

Mailing Address

100 WEST CYPRESS CREEK ROAD
910
FORT LAUDERDALE FL 33309

100 WEST CYPRESS CREEK ROAD
910
FORT LAUDERDALE FL 33309



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

04-3728314

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional Fee Required

1st MOORE

CR2E037 (10/06)

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

BRONCHICK, KENNETH C
100 WEST CYPRESS CREEK ROAD
910
FORT LAUDERDALE FL 33309

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when restate.)

DATE

FILE NOW: FEE IS \$61.25
Due By May 1, 2007

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

TITLE PD ☐ Delete
NAME PHARES, ELIHU
STREET ADDRESS 2104 NE 45 STREET
CITY-STATE-ZIP FORT LAUDERDALE FL 33308

TITLE VPD ☐ Delete
NAME FIALK, DEBORAH I
STREET ADDRESS 4726 NW 21ST COURT
CITY-STATE-ZIP COCONUT CREEK FL 33063

TITLE TD ☐ Delete
NAME BRONCHICK, KENNETH C
STREET ADDRESS 100 WEST CYPRESS CREEK ROAD, SUITE 910
CITY-STATE-ZIP FORT LAUDERDALE FL 33309

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-STATE-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-STATE-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-STATE-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-STATE-ZIP

TITLE ☐ Change ☐ Addition
NAME U00000666291
STREET ADDRESS 03/23/07-80066-003 61.25
CITY-STATE-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-STATE-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-STATE-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-STATE-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-STATE-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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 like empowered.

SIGNATURE:

Deborah Fialk

2/13/07

954-973-3679