



FILED
Feb 15, 2007 8:00 am
Secretary of State

2007 NOT-FOR-PROFIT CORPC ANNUAL REPORT

01-17-2007 90050 027 ****61.25

DOCUMENT # N06000005883				 01042007 Chg-NP CR2E037 (12/06)	
1. Entity Name SOUTHSHORE ROTARY FOUNDATION, INC.					
Principal Place of Business 2118 STERLING GLEN COURT SUN CITY CENTER, FL 33573		Mailing Address PO BOX 6072 SUN CITY CENTER, FL 33571		2/12/07  01042007 Chg-NP CR2E037 (12/06)	
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. FBI Number 20-4961494	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>				\$8.75 Additional Fee Required	
8. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent	
YASHINSKY, EDWARD 2118 STERLING GLEN COURT SUN CITY CENTER, FL 33573				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: <i>Edward Waszky</i>		EDWARD YASHINSKY		1/15/07	
Filing Fee is \$61.25 Due by May 1, 2007		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P MURRAY, STEVE 2411 KIRKLAND ROAD DOVER, FL 33527	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	PRES. ADCOCK JAMES 5010 CAUSEWAY BLVD TAMPA, FL 33619	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T BURDICK, SHEILA 500 FAIRHOPE DRIVE APOLLO BEACH, FL 33572	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D FLORES, JESSIE 1821 COSTA STREET SUN CITY CENTER, FL 33573	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ADLOCK, JAMES 5010 CAUSEWAY BLVD TAMPA, FL 33619	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	WESLEY JOYNER DIRECTOR 6542 U.S HWY 41 N. APOLLO BEACH, FL 33572	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D HARBURG, JERRY 9215 SUNNYOAK DRIVE RIVERVIEW, FL 33569	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D PLEVEL, JOSEPH 6439 RUBIA CIRCLE APOLLO BEACH, FL 33572	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
12. I hereby certify that the information supplied with this filing does not qualify 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 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 the empowered.					
SIGNATURE: <i>Edward Waszky</i>		EDWARD YASHINSKY		1/15/07	

813-
688-0751