

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED
May 13, 2009
Secretary of State**

DOCUMENT# N14810

Entity Name: SEBRING SUNRISE ROTARY CLUB, INC.

Current Principal Place of Business:

C/O MACBETH, J. ROSS
2543 U.S. 27 SOUTH
SEBRING, FL 33870 US

New Principal Place of Business:

Current Mailing Address:

C/O MACBETH, J. ROSS
2543 U.S. 27 SOUTH
SEBRING, FL 33870 US

New Mailing Address:

FEI Number: 59-2704818 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

SCHOMMER, NICHOLAS
329 SOUTH COMMERCE AVENUE
SEBRING, FL 33870 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: TD () Delete
Name: CROWDER, CRAIG
Address: 4027 WILSON AVENUE
City-St-Zip: SEBRING, FL 33875

Title: PD () Delete
Name: SWAINE, WILL
Address: 611 US 27 SOUTH
City-St-Zip: SEBRING, FL 33870

Title: DS () Delete
Name: MACBETH, J. ROSS
Address: 2543 US 27 SOUTH
City-St-Zip: SEBRING, FL 33870

Title: D () Delete
Name: ELWELL, DON
Address: 2701 SUNSET DR
City-St-Zip: SEBRING, FL 33870

Title: D () Delete
Name: WHEELER, KEN
Address: 1901 SUNRISE DRIVE
City-St-Zip: SEBRING, FL 33875

Title: D () Delete
Name: ROUSCH, REBECCA
Address: 927 GREY FOX AVENUE
City-St-Zip: SEBRING, FL 33875

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: PD (X) Change () Addition
Name: GAVARRETE, RAMON D
Address: 209 FIAT AVENUE
City-St-Zip: SEBRING, FL 33872

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

Title: D (X) Change () Addition
Name: DRURY, GREIG
Address: 160 ORDAY ROAD
City-St-Zip: SEBRING, FL 33875

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 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: J. ROSS MACBETH

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05/13/2009

Electronic Signature of Signing Officer or Director

Date