

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N16366

FILED
Jan 19, 2009
Secretary of State

Entity Name: ROTARY FOUNDATION OF FORT MYERS SOUTH, INC.

Current Principal Place of Business:

6810 INTERNATIONAL CENTER BLVD
FORT MYERS, FL 33912 US

New Principal Place of Business:

Current Mailing Address:

PO BOX 2607
FORT MYERS, FL 33902 US

New Mailing Address:

PO BOX 2607
FT MYERS, FL 33902

FEI Number: 59-2707408

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CLIFFORD CHAIPEL, CPA
6810 INTERNATIONAL CENTER BLVD
FT MYERS, FL 33912 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: P () Delete
Name: WHEELER, WILSON
Address: PO BOX 2607
City-St-Zip: FORT MYERS, FL 33902

Title: T () Delete
Name: CHAIPEL, CLIFF
Address: PO BOX 2607
City-St-Zip: FT. MYERS, FL 33902

Title: D () Delete
Name: UNDERHILL, TIM
Address: PO BOX 2607
City-St-Zip: FT. MYERS, FL 33902

Title: D () Delete
Name: CHANCELLOR, JACK
Address: PO BOX 2607
City-St-Zip: FORT MYERS, FL 33902

Title: S () Delete
Name: TEW, MICHAEL
Address: PO BOX 2607
City-St-Zip: FORT MYERS, FL 33902

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: UNDERHILL, TIM
Address: PO BOX 2607
City-St-Zip: FORT MYERS, FL 33902

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

Title: S (X) Change () Addition
Name: CHANCELLOR, JACK
Address: PO BOX 2607
City-St-Zip: FT. MYERS, FL 33902

Title: D (X) Change () Addition
Name: HOOPER, BOB
Address: PO BOX 2607
City-St-Zip: FORT MYERS, FL 33902

Title: D (X) Change () Addition
Name: MAYERON, VICTOR
Address: PO BOX 2607
City-St-Zip: FORT MYERS, FL 33902

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: CLIFFORD CHAIPEL

TREA

01/19/2009

Electronic Signature of Signing Officer or Director

Date