

FILE NOW: FILING FEE IS \$61.25

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Apr 10 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # N19680 (0)

1. Corporation Name
THE ROTARY CLUB OF BOCA RATON, INC.



Principal Place of Business		Mailing Address	
2255 GLADES RD. 324A BOCA RATON FL 33431 US		2255 GLADES RD. STE 324A BOCA RATON FL 33431 US	
21	2. Principal Place of Business	26	2a. Mailing Address
	Suite, Apt. #, etc.		Suite, Apt. #, etc.
22	City & State	27	City & State
23	Zip	28	Country
24	Country	29	Zip
		30	Country

3. Date Incorporated or Qualified	03/16/1987	
4. FEI Number	59-1355425	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired	<input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution	<input type="checkbox"/>	\$5.00 May Be Added to Fees
7. Is this nonprofit corporation a homeowners association?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30.	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

9. Name and Address of Current Registered Agent

**FRISCH, DENNIS R.
98 SOUTHWEST NINTH TERRACE
BOCA RATON FL 33432**

10. Name and Address of New Registered Agent

81	Name
82	Street Address (P.O. Box Number is Not Acceptable)
83	
84	City
85	Zip Code

FL

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD	1.1 TITLE	Change <input checked="" type="checkbox"/> Addition <input type="checkbox"/>
NAME	ECKELSON, ROBERT	1.2 NAME	PO William F. Glass
STREET ADDRESS	8884 SKYLINE DR	1.3 STREET ADDRESS	125 NW 13 Street
CITY-ST-ZIP	DELRAY BEACH FL	1.4 CITY-ST-ZIP	Boca Raton, FL 33432
TITLE	VD	2.1 TITLE	Change <input checked="" type="checkbox"/> Addition <input type="checkbox"/>
NAME	PASSMORE, JAMIE	2.2 NAME	Annette Reiburg
STREET ADDRESS	7053 NE 3RD AVE	2.3 STREET ADDRESS	2255 Glades Road
CITY-ST-ZIP	BOCA RATON FL	2.4 CITY-ST-ZIP	Boca Raton 33431
TITLE	D	3.1 TITLE	Change <input checked="" type="checkbox"/> Addition <input type="checkbox"/>
NAME	GLASS, WILLIAM	3.2 NAME	Phil Modder
STREET ADDRESS	125 NW 13 STREET	3.3 STREET ADDRESS	3475 Sheridan St.
CITY-ST-ZIP	BOCA RATON FL	3.4 CITY-ST-ZIP	Hollywood, FL 33021
TITLE	DT	4.1 TITLE	Change <input checked="" type="checkbox"/> Addition <input type="checkbox"/>
NAME	DONALD R. WHALEN	4.2 NAME	Li Edgar Barnhill III
STREET ADDRESS	4255 NW 26 COURT	4.3 STREET ADDRESS	1037 N.W. 5th St.
CITY-ST-ZIP	BOCA RATON FL	4.4 CITY-ST-ZIP	Boca Raton, FL 33486
TITLE		5.1 TITLE	Change <input type="checkbox"/> Addition <input type="checkbox"/>
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	Change <input type="checkbox"/> Addition <input type="checkbox"/>
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *L. Edgar Barnhill III* Treasurer 4-1-98 561-998-7999

CR2E037 (10/97)